Child Care and Development Fund (CCDF) Plan For Missouri FFY 2022-2024

1 Define CCDF Leadership and Coordination with Relevant Systems

This section identifies the leadership for the CCDF program in each Lead Agency and the entities and individuals who will participate in the implementation of the program. It also identifies the stakeholders that were consulted to develop the Plan and who the Lead Agency collaborates with to implement services. Respondents are asked to identify how match and maintenance-of-effort (MOE) funds are used. Lead Agencies explain their coordination with child care resource and referral (CCR&R) systems and describe their efforts on their disaster preparedness and response plans to support continuity of operations in response to emergencies.

1.1 CCDF Leadership

The Governor of a state or territory must designate an agency (which may be an appropriate collaborative agency) or establish a joint interagency office to represent the state or territory as the Lead Agency. The Lead Agency agrees to administer the program in accordance with applicable federal laws and regulations and the provisions of this Plan, including the assurances and certifications appended hereto (658D; 658E(c)(1) and 98.16 (a)). Note: An amendment to the CCDF State Plan is required if the Lead Agency changes or if the Lead Agency official changes.

1.1.1 Which Lead Agency is designated to administer the CCDF program?

Identify the Lead Agency or joint interagency office designated by the state or territory. ACF will send official grant correspondence, such as grant awards, grant adjustments, Plan approvals, and disallowance notifications, to the designated contact identified here (658D(a) and 98.16(a)).

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a) Lead Agency or Joint Interagency Office Information:

Name of Lead Agency: Department of Elementary and Secondary Education

Street Address: 205 Jefferson Street, PO Box 480

City: Jefferson City

State: MO

ZIP Code: 65102-0480

Web Address for Lead Agency: https://dese.mo.gov/

b) Lead Agency or Joint Interagency Official Contact Information:

Lead Agency Official First Name: Margaret "Margie"

Lead Agency Official Last Name: Vandeven

Title: Commissioner of Education

Phone Number: 573-751-4446

Email Address: Commissioner@dese.mo.gov

1.1.2 Who is the CCDF Administrator?

Identify the CCDF Administrator designated by the Lead Agency, the day-to-day contact, or the person with responsibility for administering the state's or territory's CCDF program. ACF will send programmatic communications, such as program announcements, program instructions, and data collection instructions, to the designated contact identified here. If there is more than one designated contact with equal or shared responsibility for administering the CCDF program, please identify the Co-Administrator or the person with administrative responsibilities and include his or her contact information.

a) CCDF Administrator Contact Information:

CCDF Administrator First Name: Stephanie

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CCDF Administrator Last Name: Chandler

Title of the CCDF Administrator: Program Administrator

Phone Number: 573.751.6793

Email Address: Stephanie.Chandler@dss.mo.gov

b) CCDF Co-Administrator Contact Information (if applicable):

CCDF Co-Administrator First Name: Tracy

CCDF Co-Administrator Last Name: Blase

Title of the CCDF Co-Administrator: Program Development Specialist

Description of the Role of the Co-Administrator: Serves as the back-up to the CCDF Administrator in the development, administration, and monitoring of this state plan.

Phone Number: 573.751.4431

Email Address: Tracy.H.Blase@dss.mo.gov

1.2 CCDF Policy Decision Authority

The Lead Agency has broad authority to administer (i.e., establish rules) and operate (i.e., implement activities) the CCDF program through other governmental, non-governmental, or public or private local agencies as long as the Lead Agency retains overall responsibility for the administration of the program (658D(b) and 98.16 (d)(1)). Administrative and implementation responsibilities undertaken by agencies other than the Lead Agency must be governed by written agreements that specify the mutual roles and responsibilities of the Lead Agency and other agencies in meeting the program requirements.

1.2.1 Which of the following CCDF program rules and policies are administered (i.e., set or established) at the state or territory level or local level? Identify whether CCDF program rules and policies are established by the state or territory (even if operated locally) or whether the CCDF policies or rules are established by local entities, such as counties or workforce boards (98.16(i)(3)). Check one.

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a. All program rules and policies are set or established at the state or territory level. If checked, skip to question 1.2.2.
b. Some or all program rules and policies are set or established by local entities or agencies. If checked, indicate which entities establish the following policie Check all that apply.
i. Eligibility rules and policies (e.g., income limits) are set by the:
☐ A. State or territory
Identify the entity:
B. Local entity (e.g., counties, workforce boards, early learning coalitions).
If checked, identify the entity and describe the eligibility policies the local entity(ies can set.
C. Other.
Describe:
ii. Sliding-fee scale is set by the:
A. State or territory
Identify the entity:
☐ B. Local entity (e.g., counties, workforce boards, early learning coalitions).
If checked, identify the entity and describe the sliding fee scale policies the local
entity(ies) can set.
C. Other.
Describe:
iii. Payment rates and payment policies are set by the:
A. State or territory

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	Identify the entity:
	B. Local entity (e.g., counties, workforce boards, early learning coalitions).
	If checked, identify the entity and describe the payment rates and payment policies
	the local entity(ies) can set.
	C. Other.
	Describe:
iv.	Licensing standards and processes are set by the:
	☐ A. State or territory
	Identify the entity:
	B. Local entity (e.g., counties, workforce boards, early learning coalitions).
	If checked, identify the entity and describe the type of licensing standards and processes the local entity(ies) can set.
	C. Other.
	Describe:
v.	Standards and monitoring processes for license-exempt providers are set by the: A. State or territory Identify the entity:
	racinary and criaty.
	B. Local entity (e.g., counties, workforce boards, early learning coalitions).
	If checked, identify the entity and describe the type of standards and monitoring
	processes for license-exempt providers the local entity(ies) can set.
	C. Other.

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	Describe:
vi.	Quality improvement activities, including QRIS are set by the:
	A. State or territory
	Identify the entity:
	B. Local entity (e.g., counties, workforce boards, early learning coalitions).
	If checked, identify the entity and describe the eligibility policies the local entity(ies)
	can set.
	C. Other.
	Describe:
	. Other. List and describe any other program rules and policies that are set at a level her than the state or territory level:
other agen	ead Agency has broad authority to operate (i.e., implement activities) through cies, as long as it retains overall responsibility. Complete the table below to ich entity(ies) implements or performs CCDF services.
	neck the box(es) to indicate which entity(ies) implement or perform CCDF services. conducts eligibility determinations?
	CCDF Lead Agency
	▼ TANF agency
	Local government agencies
	□ CCR&R
	Community-based organizations
W	ho assists parents in locating child care (consumer education)?
	▼ CCDF Lead Agency

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☐ TANF agency
Local government agencies
▼ CCR&R
Community-based organizations
Who issues payments?
CCDF Lead Agency
☐ TANF agency
Local government agencies
☐ CCR&R
Community-based organizations
Who monitors licensed providers?
CCDF Lead Agency
☐ TANF agency
Local government agencies
☐ CCR&R
Community-based organizations
Who monitors license-exempt providers?
▼ CCDF Lead Agency ■ ■ ■ ■ ■ ■ ■
☐ TANF agency
Local government agencies
☐ CCR&R
Community-based organizations
Who operates the quality improvement activities?
CCDF Lead Agency
☐ TANF agency
Local government agencies
☐ CCR&R
Community-based organizations
b. Other. List and describe any other state or territory agencies or partners that
implement or perform CCDF services and identify their responsibilities.
N/A

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1.2.3 Describe the processes the Lead Agency uses to oversee and monitor CCDF administration and implementation responsibilities performed by other agencies as reported above in 1.2.1 and 1.2.2 (98.16(b)). In the description include:

Written agreements. Note: The contents of the written agreement may vary based on the role the agency is asked to assume or type of project but must include at a minimum the elements below (98.11(a)(3)).

- -- Tasks to be performed
- --Schedule for completing tasks
- --Budget which itemizes categorical expenditures in accordance with CCDF requirements
- --Monitoring and auditing procedures
- --Indicators or measures to assess performance of those agencies

Any other processes to oversee and monitor other agencies.

On January 28, 2021, Missouri Governor Michael Parson and the Departments of Elementary and Secondary Education (DESE), Health and Senior Services (DHSS), and Social Services (DSS) announced the consolidation of several childhood programs across state government into a single Office of Childhood that will be housed in DESE. With the establishment of this new office, DESE is named as the Lead Agency for the administration of CCDF and will have administrative authority over state child care licensing, home visiting, IDEA Part C and Part B Section 619, Missouri's Preschool Development Grant and other key early childhood and afterschool services. This new office is effective August 28, 2021, and at the time of this state plan submission, transition activities are taking place. Therefore, DESE is submitting this state plan as Lead Agency. The Lead Agency has a Memorandum of Understanding (MOU) with the state's Temporary Assistance for Needy Families (TANF) agency, Department of Social Services (DSS), Family Support Division (FSD), for the application acceptance and process of making eligibility determinations for households eligible for the Child Care Subsidy program. DSS FSD staff are responsible for conducting

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the following tasks: processing online and paper applications for the Child Care Subsidy program, collecting necessary documentation, and implementing any applicable policy changes to eligibility as determined by the Lead Agency. The Lead Agency receives data reports, reviews targeted case review data on a monthly basis, and meets quarterly with FSD leadership. The type of data provided, for the purpose of measuring performance of the MOU, include the number of Child Care Subsidy applications processed, including those approved or denied; the length of time to process an application; data for targeted case reviews, including data on number of case errors and types of errors; and a monthly management report which contains the number of families, children, and child care providers receiving child care subsidy by type of provider (licensed, license-exempt, or registered), age category (infant, preschool, or school-age) and monthly expenditures. The Lead Agency conducts regular reviews of training and policies to determine changes to the program based on federal guidance from the U.S. Department of Health and Human Service, Administration for Children & Families, Office of Child Care, public feedback and staff error trends. The MOU is reviewed on an annual basis. Further additions to the current MOU are being developed to include activities related to the administration, implementation and monitoring of federal coronavirus stimulus funds (i.e., Coronavirus Aid, Relief, and Economic Security Act or CARES Act; Coronavirus Response and Relief Supplemental Appropriations or CRRSA Act, American Rescue Plan Act or ARP Act)as the Lead Agency at the time of award was DSS, but the Lead Agency at the time of implementation will be DESE. Therefore, continued monitoring of such funds will be required by both agencies.

1.2.4 Upon request, and to the extent practicable and appropriate, Lead Agencies must ensure any code or software for child care information systems or information technology for which a Lead Agency or other agency expends CCDF funds to develop must be made available to other public agencies. This includes public agencies in other states, for their use in administering child care or related programs (98.15(a)(11)).

Assure by describing how the Lead Agency makes child care information systems systems (e.g., subsidy, registry, and QRIS systems) available to public agencies in other states.

Missouri uses a variety of information technology (IT) systems to support the activities

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funded through CCDF. To the extent practicable and appropriate, information from these systems are made available either through public internet portals, which will be indicated by a hyperlink below, or by forwarding a formal request to the Lead Agency. For child care licensing activities, IT systems include: 1) Missouri Child Care Information System (MOCCIS) which captures regulated child care provider applications and approval information; dates of supporting documentation received for licensure; licensing specialists notes and actions; inspection overviews and licensure decisions. The data are then transferred to the Show Me Child Care internet portal at: https://healthapps.dhss.mo.gov/childcaresearch/; 2) The Child Care Regulation Information System (CCRIS) captures department vendor numbers, provider information, and complaints. After supervisor approval, substantiated complaints are released to the Show Me Child Care Portal; 3) The Show Me Child Care portal is the web site that provides information on the results of inspections, special supervision, and substantiated complaints. In addition, it allows users to search for a child care provider by name, type of facility, street address, city, county or zip code; For child care subsidy activities, IT systems include: 1) Child Care Business Information Solution (CCBIS) which is a web-based software that collects child care time and attendance for the Lead Agency and provides tools to monitor financial compliance. The system provides the Lead Agency with a comprehensive, time efficient administration of the Child Care Subsidy program. The system allows authorized users to document attendance for payment processing for children eligible for state or federally funded child care subsidies; 2) The Family Assistance Management Information System (FAMIS) is the eligibility, authorization and payment system used for child care subsidy; and 3) Claims and Restitution System (CARS) is used to enter overpayment claims and track payments made by providers for claims. FAMIS and CARS are not fully funded through CCDF due to the systems also being used for TANF and Supplemental Nutrition Assistance Program (SNAP). Additional information on the systems may be requested from the Lead Agency's State Administrator listed in section 1.1.2 of this plan.

1.2.5 Lead Agencies must have in effect policies to govern the use and disclosure of confidential and personally identifiable information about children and families receiving CCDF assistance and child care providers receiving CCDF funds (98.15(b)(13)).

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Certify by describing the Lead Agency's policies related to the use and disclosure of confidential and personally identifiable information.

The Lead Agency's (DESE) workforce, including employees, trainees, contractors, interns and other persons who have access to DESE information systems and records in the course of business, onsite and from alternate worksites, must agree to DESE procedures related to confidentiality requirements, including but not limited to the Department Data Breach Procedure and the Department Data Breach Management Agreement. These documents set out DESE's confidentiality obligations, limitations to use of information systems, protocols for the release of information, and steps to take if there is a breach of confidential or personally identifiable information. Additionally, all contracts and Memorandums of Understanding have confidentiality clauses. DSS requires all employees to sign a confidentiality form prohibiting the release of personal information pertaining to children and families receiving any services without their express written permission. Child care provider information is available as a matter of public record, but is limited to protect personal identifying information. How this information is handled is addressed in the provider registration (CD-269 Section 4.13) or contract (CM-5 Section 4.14) materials.

1.3 Consultation in the Development of the CCDF Plan

The Lead Agency is responsible for developing the CCDF plan, which serves as the application for a 3-year implementation period. As part of the Plan development process, Lead Agencies must consult with the following:

(1) Appropriate representatives of units of general purpose local government-(658D(b)(2); 98.10(c); 98.12(b); 98.14(b)). General purpose local governments are defined by the U.S. Census at

https://www.census.gov/newsroom/cspan/govts/20120301_cspan_govts_def_3.pdf.

(2) The State Advisory Council (SAC) on Early Childhood Education and Care (pursuant to 642B(b)(I)(A)(i) of the Head Start Act) (658E(c)(2)(R); 98.15(b)(1)) or similar coordinating body

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pursuant to 98.14(a)(1)(vii).

(3) Indian tribe(s) or tribal organization(s) within the state. This consultation should be done in a timely manner and at the option of the Indian tribe(s) or tribal organization(s) (658D(b)(1)(E)).

Consultation

involves meeting with or otherwise obtaining input from an appropriate agency in the development of the state or territory CCDF Plan. Describe the partners engaged to provide services under the CCDF program in question 1.4.1.

- 1.3.1 Describe the Lead Agency's consultation efforts in the development of the CCDF Plan. Note: Lead Agencies must describe in a. c. consultation efforts with required partners listed in Rule and Statute. ACF recognizes that there is great value in consulting with other entities and has provided element d. for Lead Agencies to identify consultation efforts with other agencies or organizations.
 - a) Describe how the Lead Agency consulted with appropriate representatives of general purpose local governments.

The Lead Agency uses an existing email distribution list to consult with representatives of local government, including the counties of Adair, Boone, Cape Girardeau, Green, Jackson, and St. Louis, representing both rural and urban areas of the state. Due to the COVID-19 pandemic, in-person consultation has not been possible. In addition to the Lead Agency's continued consultation on program administration, a draft of the CCDF plan was forwarded to these entities to provide content on the proposed plan. A thirty (30) day public comment period was provided in order for representatives of local government, those included in the member distribution list, as well as the general public, to comment on the proposed state plan.

b) Describe how the Lead Agency consulted with the State Advisory Council or similar coordinating body.

As a standing member of the Coordinating Board for Early Childhood (CBEC), Missouri's State Advisory Council, the Lead Agency solicits ongoing consultation on CCDF administration, including recommendations on how funds are utilized to improve child outcomes in all areas of program administration. A draft of the CCDF plan was shared with CBEC during a listening session held on May 4, 2021, for board members to review

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and provide comments and/or suggestions.

- c. Describe, if applicable, how the Lead Agency consulted with Indian tribes(s) or tribal organizations(s) within the state. Note: The CCDF regulations recognize the need for states to conduct formal, structured consultation with Tribal governments, including Tribal leadership. Many states and tribes have consultation policies and procedures in place. N/A
- d) Describe any other entities, agencies, or organizations consulted on the development of the CCDF plan.

The Lead Agency provided the pre-print and consulted with several stakeholders during the development of the state plan. A Child Care Advisory Group, consisting of Kids Win Missouri, a child and family advocacy organization, Child Care Aware of Missouri, Missouri After School Network, and providers representing a variety of child care settings, submitted comments and suggestions for revisions to the Lead Agency during the development of the state plan. Additionally, the Lead Agency conducted a series of 16 listening sessions around the state to collect the challenges and ideas for improving the early childhood system. Accordingly, the Lead Agency incorporated these suggestions into the state plan, as applicable.

1.3.2 Describe the statewide or territory-wide public hearing process held to provide the public with an opportunity to comment on the provision of child care services under this Plan (658D(b)(1)(C); 98.16(f)).

Reminder:

Lead Agencies are required to hold at least one public hearing in the state or territory, with sufficient statewide or territory-wide distribution of notice prior to such a hearing to enable the public to comment on the provision of child care services under the CCDF Plan. At a minimum, this description must include:

a) Date of the public hearing. 05/18/2021

Reminder: Must be no earlier than January 1, 2021, which is 9 months prior to the October 1, 2021, effective date of the Plan. If more than one public hearing was held,

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please enter one date (e.g., the date of the first hearing, the most recent hearing or any hearing date that demonstrates this requirement).

b) Date of notice of public hearing (date for the notice of public hearing identified in a. 04/28/2021

Reminder: Must be at least 20 calendar days prior to the date of the public hearing. If more than one public hearing was held, enter one date of notice (e.g. the date of the first notice, the most recent notice or any date of notice that demonstrates this requirement). c) How was the public notified about the public hearing? Please include specific website links if used to provide notice.

The public was notified about the final draft plan through the state of Missouri Gov Delivery email system, which has over 5,500 email addresses of child care providers and early childhood stakeholders throughout the state of Missouri. All providers who receive Child Care Subsidy and use the electronic time and attendance received a message notifying them when the plan was posted and when the public comment period opened. In addition, stakeholders in the early childhood system were notified of the final draft plan through various DESE distribution lists for public schools, Preschool Development Grant, etc., which has over 3,000 email addresses (some of which may be a duplicate count of the Gov Delivery email system). The Section for Child Care Regulation notified child care providers through their list serve, Child Care Aware of Missouri posted the notice on their Facebook page, and other entities that contract with the Lead Agency were notified accordingly. The draft state plan, information on public comments, and the public hearings' notice were posted at: https://earlyconnections.mo.gov/child-care-and-development-fund.

- d) Hearing site or method, including how geographic regions of the state or territory were addressed. All public hearings were held virtually due to the COVID-19 pandemic limiting in-person settings. All public hearings were promoted through the online Gov Delivery system, DESE email distribution lists, social media platforms, the provider online payment system¿s messaging page, and shared with various stakeholder groups. In addition to the live hearings, there was a recorded version available to stakeholders who were unable to attend one of the hearings.
- e) How the content of the Plan was made available to the public in advance of the public hearing. (e.g. the Plan was made available in other languages, in multiple formats, etc.) The draft state plan was published online at: https://earlyconnections.mo.gov/child-care-and-development-fund and was available on this site prior to the submission of the final

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document. The state plan is available in English; however, a statement indicating "access to other languages may be obtained through use of the Google Chrome browser" is included with the postings. Using Google Chrome allows users to translate the document into another language. Upon request, the Lead Agency provides a translator to interpret the state plan.

- f) How was the information provided by the public taken into consideration regarding the provision of child care services under this Plan? During the time the state plan content was drafted, the Lead Agency conducted listening sessions with multiple providers, provider groups, and community partners in 16 areas around the state. Comments from stakeholders were incorporated into the initial draft. During local public hearings, the general public had an opportunity to provide additional comments. The Lead Agency considered, and responded to all comments and, where applicable, the state plan was modified accordingly. A complete list of all comments and Lead Agency responses can be found online at: https://earlyconnections.mo.gov/child-care-and-development-fund.
- 1.3.3 Lead Agencies are required to make the submitted and final Plan, any Plan amendments, and any approved requests for temporary relief (i.e., waivers) publicly available on a website (98.14(d)). Please note that a Lead Agency must submit Plan amendments within 60 days of a substantial change in the Lead Agency's program. (Additional information may be found here: https://www.acf.hhs.gov/occ/resource/pi-2009-01)
 - a) Provide the website link to where the Plan, any Plan amendments, and/or waivers are available. Note: A Plan amendment is required if the website address where the Plan is posted is changed.

The Lead Agency posted the proposed state plan for FFY 2022-2024 and informational flyers for 2021 public comment period and local public hearings at: https://earlyconnections.mo.gov/child-care-and-development-fund . The current and past state plans are posted at: https://dss.mo.gov/cd/child-care/child-care-development-fund-plan.htm.

- b) Describe any other strategies that the Lead Agency uses to make the CCDF Plan and Plan amendments available to the public (98.14(d)). Check all that apply and describe the strategies below, including any relevant website links as examples.
 - ✓ Working with advisory committees.

Describe:

The Lead Agency ensured Missouri's CBEC members were included in the notice that

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the draft plan was posted and of the public comment period. The Lead Agency presented an overview of the draft plan to CBEC members on May 4, 2021.

Working with child care resource and referral agencies.

Describe:

The Lead Agency works with Child Care Aware of Missouri, the Child Care Resource and Referral (CCR&R) contractor in the state, leading up to the drafting process, including holding several meetings to discuss changes and listening to suggestions on changes to the Child Care Subsidy program.

Providing translation in other languages.

Describe:

The online notice of the draft plan includes this statement "access to other languages may be obtained through use of the Google Chrome browser." Posting the plan online allows users to utilize Google Chrome to translate to other languages as needed.

Sharing through social media (e.g., Twitter, Facebook, Instagram, email).

Describe:

The Lead Agency posted the proposed state plan at:

https://earlyconnections.mo.gov/child-care-and-development-fund. This link was shared through social media (i.e., Facebook and Twitter) and emails were sent to all stakeholders who subscribe to the various early childhood email systems.

Providing notification to stakeholders (e.g., parent and family groups, provider groups, advocacy groups). Describe:

Describe:

The Lead Agency sent a notice of the public comment period and public hearings to various stakeholders, including the Parent Advisory Council and advocacy groups, to encourage their participation. The electronic time and attendance system has a messaging system that allowed the Lead Agency to notify all child care provider types. Advocacy groups, as well as the Missouri Head Start State Collaboration Office and Missouri Head Start Association, were also encouraged to distribute the state plan information, notice of public hearings and public comment period to their stakeholders and early childhood partners.

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	Working with statewide afterschool networks or similar coordinating
	entities for out-of-school time.
	Other.
De	scribe:

1.4 Coordination with Partners to Expand Accessibility and Continuity of Care

1.4 Coordination with Partners to Expand Accessibility and Continuity of Care

Lead Agencies are required to describe how the state or territory will efficiently, and to the extent practicable, coordinate child care services supported by CCDF with programs operating at the federal, state/territory, and local levels for children in the programs listed below. This includes programs for the benefit of Indian children, infants and toddlers, children with disabilities, children experiencing homelessness, and children in foster care (98.14(a)(1)).

1.4.1 Describe how the Lead Agency coordinates the provision of child care services with the following programs to expand accessibility and continuity of care and to assist children enrolled in early childhood programs in receiving full-day services that meet the needs of working families (658E(c)(2)(O); 98.12(a); 98.14(a)).

This list includes agencies or programs required by law or rule, along with a list of optional partners that Lead Agencies potentially would coordinate with over the next 3 years to expand accessibility and continuity of care and to assist children enrolled in early childhood programs in receiving full-day services.

Include in the descriptions the goals of this coordination, such as:

- -- extending the day or year of services for families;
- -- smoothing transitions for children between programs or as they age into school;
- -- enhancing and aligning the quality of services for infants and toddlers through schoolage children;
- -- linking comprehensive services to children in child care or school age settings; or
- -- developing the supply of quality care for vulnerable populations (as defined by the Lead Agency) in child care and out-of-school time settings

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Check the agencies or programs the Lead Agency will coordinate with and describe all that apply.

- a. The Lead Agency is required to coordinate with the following agencies. Provide a description for how coordination occurred.
 - i. Appropriate representatives of the general purpose local government, which can include counties, municipalities, or townships/towns. Describe the coordination goals, processes, and results:

The Lead Agency attends regular meetings with the City of St. Louis (e.g.,Northeast Housing and Childcare Committee meetings with Economic Development and elected officials), participates in advocacy hosted legislative information sessions and, when appropriate, conducts outreach with other government and elected officials. Through participation in these activities, the Lead Agency is able to provide increased transparency on the Child Care Subsidy program and highlight its challenges and successes. The Lead Agency partners with such groups to inform them of upcoming changes and listen to areas where improvement is needed. The Lead Agency will continue its coordination efforts by conducting outreach activities through public forums and informational meetings with various local government groups to identify challenges and gaps in service delivery, barriers to child care provider access, and to facilitate effective practices unique to local communities. The Lead Agency recognizes the value in collaborating with other social service agencies as well as child serving organizations including, but not limited to, local Head Start programs, child welfare organizations, homeless prevention programs, and local health departments.

ii. State Advisory Council on Early Childhood Education and Care or similar coordinating body (pursuant to 642B(b)(I)(A)(i) of the Head Start Act). Describe the coordination goals, processes, and results:

The Lead Agency is a permanent standing board member of the State Advisory Council, the CBEC. The CBEC council is required to meet four times a year and, on occasion, will meet more frequently to address the needs of the council members and programs. Coordination of early childhood programs is guided by the state's Early Care and Education (ECE) Strategic Plan and is founded on the work completed by Missouri's Early Childhood Comprehensive Systems plan. The ECE plan sets forth guiding principles and strategic goals to increase support for families, parent education,

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increasing access to higher quality child care, health, and mental health services. The ECE Strategic Plan is available at: https://dese.mo.gov/sites/default/files/qs-el-2020-pdg-strategic-plan.pdf.

Check here if the Lead Agency has official representation and a decision-making role in the State Advisory Council or similar coordinating body.

iii. Indian tribe(s) and/or tribal organization(s), at the option of individual tribes. Describe the coordination goals, processes, and results, including which tribe(s) was (were) consulted:

N/A

N/A-Check here if there are no Indian tribes and/or tribal organizations in the state.

iv. State/territory agency(ies) responsible for programs for children with special needs, including early intervention programs authorized under the Individuals with Disabilities Education Act (Part C for infants and toddlers and Part B, Section 619 for preschool). Describe the coordination goals, processes, and results:

The Lead Agency is responsible for IDEA Part C and Part B, Section 619 as part of the new Office of Childhood. This office has consolidated various early childhood programs and services that were previously housed in different state agencies. Under this single office, the Lead Agency wil be able to make decisions about child find, universal screening, and referral practices that take place across programs serving children birth to age five as a way to identify children with special needs. Coordination goals include increasing the number of developmental screenings and decreasing the number of children who are ineligible for Part C after an evaluation was conducted. Additionally, coordinating a smooth transition from Part C to Part B, Section 619 is part of the school readiness initiative being undertaken by the Lead Agency.

v. State/territory office/director for Head Start state collaboration. Describe the coordination goals, processes, and results:

The Lead Agency provides CCDF funding to support the Missouri Head Start State Collaboration Office in its efforts to coordinate the state's Head Start services. A MOU has been drafted between the Collaboration Office, the Lead Agency, and the Missouri

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Department of Mental Health(DMH) to encourage collaboration among Head Start and Early Head Start programs, early education and child care programs and services supported by the agreement parties. It also encourages the development of local agreements tailored to meet the unique needs of community programs and necessary partnerships.

vi. State/territory agency responsible for public health, including the agency responsible for immunizations. Describe the coordination goals, processes, and results:

The Lead Agency has an MOU with DMH and DHSS for the goal of improving the quality and availability of safe and healthy child care. As part of this MOU, the Lead Agency receives reports about how many families receive immunization education. In collaboration with DHSS, the Lead Agency provides child care consultation and/or education to child care providers related to health issues in child care settings and health promotion activities to children in child care, which includes providing immunization education through the local public health agencies. In addition, the Lead Agency has established indicators of school readiness that include the percentage of children with up-to-date immunizations as part of Health Services necessary for children to be ready for school. The Lead Agency is modifying the existing MOU with DHSS in order to collect these data as part of school readiness indicators.

vii. State/territory agency responsible for employment services/workforce development. Describe the coordination goals, processes, and results:

The Department of Higher Education and Workforce Development is responsible for implementation of the Workforce Innovation and Opportunity Act (WIOA) state plan. Multiple state agencies oversee nearly 70 employment and training programs. Grants have been provided to higher education facilities through COVID relief funds to expand or begin child care programs. These programs will allow students in Early Learning to gain their experience on site. The Lead Agency will conduct outreach to the WIOA steering committee, local partnerships, and other interested stakeholders to determine program efficiencies that will support increases and stability in the child care sector. The child care providers have, and continue, to provide feedback on programmatic changes they would like, but the state agency cannot implement some of the suggestions/changes because the suggestions/changes are statutory and need to go through the General Assembly.

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viii. State/territory agency responsible for public education, including Prekindergarten (PreK). Describe the coordination goals, processes, and results:

The Lead Agency began oversight of the DHSS and DSS child care programs on August 28, 2021. This allow for coordination of pre-kindergarten programs by highlighting potential opportunities to provide extended day child care services beyond the school day. Extended day child care services help support low income families' work and educational needs. This coordination will continue to support the ability of local educational agencies (LEAs) to contract with private child care providers to provide prekindergarten services.

ix. State/territory agency responsible for child care licensing. Describe the coordination goals, processes, and results:

The Lead Agency began oversight of the DHSS and DSS child care programs on August 28, 2021. This allows for the coordination of child care licensing with other child care activities by combining professional development efforts and utilizing each other's expertise to meet a common goal for early childhood professionals and child care providers. Licensed child care providers who participate in the Child Care Subsidy Program struggle with meeting the training requirements for each program. By combining efforts, we can ensure that trainings developed for one provider type will also meet the requirements of another provider type. In addition to professional development, the Lead Agency has the ability to develop one background screening process for licensed and subsidy providers. The Lead Agency will analyze the differences between the monitoring visits that unlicensed subsidy providers receive and will work toward a process to combine the monitoring visits with regulatory visits for license-exempt providers who are currently receiving two separate inspections/visits.

x. State/territory agency responsible for the Child and Adult Care Food Program (CACFP) and other relevant nutrition programs. Describe the coordination goals, processes, and results:

The Lead Agency coordinates a quarterly meeting with representatives from the Environmental Child Care Program and the Child and Adult Care Food Program housed in the DHSS. The goal of the quarterly meetings is to maintain open communication in the activities of each participating agency, to develop recommendations on health and safety best practices in child care settings, to develop and implement healthy meal practices in child care settings, and to integrate these recommendations into the state's

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professional development/training system. Evidence of this coordinated effort is in the materials developed for inclusion in the Child Care Provider Policy Manual at: https://dss.mo.gov/cd/child-care/files/provider-policy-manual.pdf and a published list of health and safety standards for license-exempt and registered providers at: https://dss.mo.gov/cd/child-care/files/standards-lex-sof.pdf.

xi. McKinney-Vento state coordinators for homeless education and other agencies providing services for children experiencing homelessness and, to the extent practicable, local McKinney-Vento liaisons. Describe the coordination goals, processes, and results: The Lead Agency's homeless coordinator collaborates with state social service agencies through participation in the Special Education Advisory Panel and State Interagency Coordinating Council. These councils include members who are professionals working in the areas of health and mental health, preschool programs, community organizations and other agencies. One of the goals of these councils is to improve the provision of comprehensive education and related services to homeless preschool-aged children and their families. Additionally, the state homeless coordinator conducts at least two webinars each year and presents at a number of conferences (e.g., Governor's Council to End Homelessness, Continuum of Care, Federal Programs Conference, DHSS School Nurses Conference, National Association for the Education of Homeless Children and Youth Conference, and the Conference on the Young Years) in order to raise awareness on topics relevant to the Education of Homeless Children and Youth Program. The state homeless coordinator and the assistant director of Missouri State Head Start Collaboration Office are participating members of the Governor's Task Force on Homelessness. The Lead Agency provides ongoing training to ensure all LEAs are compliant with the school of origin inclusion for preschool students and to ensure that preschoolers experiencing homelessness have equal access to public preschool programs administered by the Lead Agency and LEAs as provided to other children. The Lead Agency reviews and monitors preschool policies and practices of LEAs through the Tiered Monitoring System, including the requirement that LEAs ensure that homeless preschool-aged children are identified by school personnel. This includes children with disabilities under Part B of the IDEA or qualified students with disabilities under Section 504 of the Rehabilitation Act of 1973. Finally, the Lead Agency provide trainings on the Child Care Subsidy program for community organizations who serve homeless families. One of the goals for these community organizations is to have an understanding of the policies and the necessary documentation required for the Child Care Subsidy program

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so the organizations can assist families in the application process.

xii. State/territory agency responsible for the Temporary Assistance for Needy Families (TANF) program. Describe the coordination goals, processes, and results:

The Lead Agency has an MOU with the TANF program agency, housed in the DSS FSD. The MOU identifies FSD as the agency that will continue to accept and process applications for the Child Care Subsidy program. Because FSD is the agency that accepts and processes all other federally support public assistance programs, this collaboration ensures that families may access services through one service delivery point. DSS will continue to collaborate with the Lead Agency regarding policy for authorizing eligible children for these families. The Lead Agency and DSS has assigned team members to conduct regular collaboration meetings to discuss opportunities for improvement, success, and challenges, with the goal of ensuring families who are determined eligible for state benefits will begin receiving benefits within 15 calendar days.

xiii. Agency responsible for Medicaid and the state Childrenâs Health Insurance Program. Describe the coordination goals, processes, and results:

The Lead Agency has established an MOU to coordinate benefits with MO HealthNet, the state's Medicaid and Children's Health Insurance Program (CHIP), to ensure therapies (e.g., physical therapy, occupational therapy, speech pathology) provided by Part C and Part B, Section 619 programs are billable for Medicaid-eligible children for the purposes of maximizing the family's benefits in both programs. The goal of this coordination is to ensure increased access to early intervention and school-based services for children with significant delays and/or disabilities. Data collected on Part C services indicate approximately 50% of children enrolled receive this benefit (data are not collected on this for Part B, Section 619 services). Additionally, the Lead Agency has an MOU with DSS FSD to accept and process a coordinated application for families applying for Medicaid and CHIP programs as well as subsidy. DSS FSD is responsible for eligibility determination for all of these programs, and the coordinated application is of benefit to families when they can fill out one application for access to multiple state assistance programs.

xiv. State/territory agency responsible for mental health. Describe the coordination goals, processes, and results:

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The DMH is the Lead Agency for infant and early childhood mental health initiatives. An MOU exists between the Missouri Head Start State Collaboration Office (MHSSCO), the Lead Agency, and DMH to encourage collaboration among Head Start and Early Head Start programs, early education, and child care programs and services supported by the parties to the agreement. It also encourages the development of local agreements tailored to meet the unique needs of community programs and necessary partnerships. The Lead Agency partners with MHSSCO and DMH to establish recommendations on mental health strategies to mitigate children from being expelled from their child care arrangement due to mental health issues. The Lead Agency is considering implementing mental health consultation services for children from birth to five years old through a partnership with DMH and the MO Association for Infant and Early Childhood Mental Health (MOAIMH-EC). This partnership will have the goal of increasing families' access to professionals in community mental health centers who are trained in infant mental health and can support families in their local communities.

xv. Child care resource and referral agencies, child care consumer education organizations, and providers of early childhood education training and professional development. Describe the coordination goals, processes, and results:

The Lead Agency currently contracts with the University of Missouri to operate OPEN, the state's Professional Development Registry. The CCR&R contractor, Child Care Aware of Missouri (CCAMO), operates a workshop calendar that tracks trainings completed by child care providers. CCAMO and the director of OPEN meet monthly to discuss the registry and data collected from the systems. The Lead Agency is in the process of acquiring a new enhanced registry system that will allow access by not only child care providers but also home visitors and teachers. Additionally, the new system will allow for both the registry and training information to be contained in a single system, making it easier to track and report data.

xvi. Statewide afterschool network or other coordinating entity for out-of-school time care (if applicable). Describe the coordination goals, processes, and results:

The Lead Agency collaborates with MASN and is a member of the Missouri After School Steering Committee which meets quarterly to discuss and set the direction for their statewide efforts. MASN includesfive committees: Funding & Sustainability, Public Awareness, Public Policy, Quality, and STEM. The Lead Agency representative serves on the Quality Committee. In addition to serving on the steering committee, Lead Agency

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staff provide presentations, upon the request of MASN, during Regional Trainings, State Trainings Missouri School Age Community Coalition Professional Development Institute (MOSAC2 PDI) and Missouri Association of Adult, Continuing, and Community Education (MAACCE) along with National Trainings.

xvii. Agency responsible for emergency management and response. Describe the coordination goals, processes, and results:

The Lead Agency facilitates the Emergency Management Child Care Workgroup that consists of representatives from the Lead Agency, the CCR&R contractor, early childhood service providers, the Department of Public Safety Emergency Management Office, local governments, and child care providers. The workgroup has reviewed and updated the Child Care Disaster Plan to meet all federal and state regulations. In addition, the Lead Agency participates in quarterly meetings of the State's Children and Youth in Disasters committee to stay up- to-date on changes in the state's emergency management plan and activities and to consider necessary revisions to the Child Care Disaster Plan.

- 1.4.1 Describe how the Lead Agency coordinates the provision of child care services with the following programs to expand accessibility and continuity of care and to assist children enrolled in early childhood programs in receiving full-day services that meet the needs of working families (658E(c)(2)(O); 98.12(a); 98.14(a)).
- b. The following are examples of optional partners a state might coordinate with to provide services. Check which optional partners the Lead Agency coordinates with and describe the coordination goals, processes and results.
- ☑ i. State/territory/local agencies with Early Head Start Child Care Partnership grants.

Describe

The Lead Agency is a liaison for the EHS/CC Federal Partnerships. Lead Agency staff provides TA on the state subsidy program and attends advisory meetings. Lead Agency staff also work with MHSSCO and Missouri Head Start Association in coordinating meetings and trainings as requested for the EHS/CC Partnerships.

ii. State/territory institutions for higher education, including community colleges

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Describe

The Lead Agency administered grants to higher education facilities to expand or begin child care programs as part of relief and response to the COVID-19 pandemic. These programs allow higher education students enrolled in Early Learning programs to gain valuable experience onsite at their higher education institution.

Г	iii. Other federal, state, local, and/or private agencies providing early
	childhood and school-age/youth-serving developmental services.
	Describe

iv. State/territory agency responsible for implementing the Maternal and Child Home Visitation programs grant.

Describe

The Lead Agency is responsible for administering the Maternal and Child Home Visitation program (MIECHV). Currently, an Early Childhood Comprehensive Services (ECCS) group meets on a quarterly basis and the Lead Agency is a member. Under the new Office of Childhood, the Lead Agency consolidated Home Visiting programs from three state agencies (Departments of Social Services, Health and Senior Services, and Elementary and Secondary Education) to streamline services and ensure providers have a consistent point of contract. Over the next three years, the Lead Agency will define areas of comparable data collection and evaluate the capacity to integrate home visiting programs throughout local and state levels of the early childhood system.

v. Agency	responsible for Ea	irly and Period	lic Screening,	Diagnostic,	and
Treatment					

Describe

vi. State/territory agency responsible for child welfare.

Describe

The DSS, Children's Division (CD) is responsible for child welfare. CD investigates allegations of child abuse and neglect in multiple settings, including child care facilities. After an investigation, CD will make a determination whether the allegations are substantiated or not substantiated. If there is a substantiated determination in a child care setting, CD provides the Lead Agency with its decision. If the provider

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	e provider's agreement or contra	,	. De
vii. Provider g	roups or associations.		
Describe The Lead Ager parent leaders make sure the or other decision activities across communities b	oups or organizations. Incy has established a Parent Add a located throughout the state of a parent voice is represented before ons are made. The PAC meets rest the state. One of the focus are because the PAC is involved in the rel and in their own communities.	Missouri. The PAC was establione, during, and after important regularly to discuss family leader as of the PAC is safe childrence prevention of child abuse an	shed to policies ership and

Optional Use of Combined Funds:

ix. Other.

Describe

States and territories have the option to combine CCDF funds with any program identified as required in 1.4.1. These programs include those operating at the federal, state, and local levels for children in preschool programs, tribal early childhood programs, and other early childhood programs, including those serving infants and toddlers with disabilities, children experiencing homelessness, and children in foster care (658E(c)(2)(O)(ii)). Combining funds could include blending multiple funding streams, pooling funds, or layering funds together from multiple funding streams to expand and/or enhance services for infants, toddlers, preschoolers and school-age children and families to allow for the delivery of comprehensive quality care that meets the needs of children and families. For example, state/territory agencies may use multiple funding sources to offer grants or contracts to programs to deliver services; a state/territory may allow a county/local government to use coordinated funding streams; or policies may be in place that allow local programs to layer CCDF funds with additional funding sources to pay for full-day, full-year child care that meets Early Head Start/Head Start Program Performance Standards or state/territory prekindergarten requirements in addition to state/territory child care licensing requirements.

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As a reminder, CCDF funds may be used in collaborative efforts with Head Start programs to provide comprehensive child care and development services for children who are eligible for both programs. In fact, the coordination and collaboration between Head Start and CCDF is strongly encouraged by sections 640(g)(1)(D) and (E); 640(h); 641(d)(2)(H)(v); and 642(e)(3) of the Head Start Act in the provision of full working day, full calendar year comprehensive services. To implement such collaborative programs, which share, for example, space, equipment, or materials, grantees may layer several funding streams so that seamless services are provided (Policy and Program Guidance for the Early Head Start - Child Care Partnerships:

https://www.acf.hhs.gov/sites/default/files/occ/acf_im_ohs_15_03.pdf).

1.5.1 Does the Lead Agency choose to combine funding for CCDF services for any required early childhood program (98.14(a)(3))?

✓ No (If no, skip to question 1.5.2)
Yes. If yes, describe at a minimum:
a) How you define "combine"

- b) Which funds you will combine
- c. What is your purpose and expected outcomes for combining funds, such as extending the day or year of services available (i.e., full-day, full-year programming for working families), smoothing transitions for children, enhancing and aligning quality of services, linking comprehensive services to children in child care, or developing the supply of child care for vulnerable populations? Note: Responses should align with the goals, processes and results describe in 1.4.1.
- d) How you will be combining multiple sets of funding, such as at the State/Territory level, local level, program level?
- e) How are the funds tracked and method of oversight

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1.5.2 Which of the following funds does the Lead Agency intend to use to meet the CCDF matching and MOE requirements described in 98.55(e) and 98.55(h)?

Note:

Lead Agencies that use Prekindergarten funds to meet matching requirements must check Prekindergarten funds and public and/or private funds.

Use of PreK for Maintenance of Effort: The CCDF final rule clarifies that public preK funds may also serve as maintenance-of-effort funds as long as the state/territory can describe how it will coordinate preK and child care services to expand the availability of child care while using public preK funds as no more than 20 percent of the state's or territory's maintenance of effort or 30 percent of its matching funds in a single fiscal year (FY) (98.55(h)). If expenditures for preK services are used to meet the maintenance-of-effort requirement, the state/territory must certify that it has not reduced its level of effort in full-day/full-year child care services (98.55(h)(1); 98.15(a)(6)).

Use of Private Funds for Match or Maintenance of Effort: Donated funds do not need to be under the administrative control of the Lead Agency to qualify as an expenditure for federal match. However, Lead Agencies do need to identify and designate in the state/territory Plan the donated funds given to public or private entities to implement the CCDF child care program (98.55(f)).

a. N/A - The territory is not required to meet CCDF matching and MOE requirements
b. Public funds are used to meet the CCDF matching fund requirement. Public funds may include any general revenue funds, county or other local public funds, state/territory-specific funds (tobacco tax, lottery), or any other public funds.
i. If checked, identify the source of funds:
General Revenue and state Early Childhood Development and Education/Care funds
c. Private donated funds are used to meet the CCDF matching funds requirement. Only private funds received by the designated entities or by the Lead Agency may be counted for match purposes (98.53(f)). i. If checked, are those funds:

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	A. Donated directly to the State?
	B. Donated to a separate entity(ies) designated to receive private donated funds?
ii. If	checked, identify the name, address, contact, and type of entities designated to
rec	eive private donated funds:
	State expenditures for PreK programs are used to meet the CCDF matching and requirement.
	hecked, provide the estimated percentage of the matching fund requirement that be met with Prekindergarten expenditures (not to exceed 30 percent):
i. If	the percentage is more than 10 percent of the matching fund requirement,
des	scribe how the State will coordinate its preK and child care services:
	Describe the Lead Agency efforts to ensure that Prekindergarten programs meet the eds of working parents:
	State expenditures for Prekindergarten programs are used to meet the CCDF intenance-of-effort requirements. If checked,
i. A	ssure by describing how the Lead Agency did not reduce its level of effort in full-
day	/full-year child care services, pursuant to 98.55(h)(1) and 98.15(a)(6).
	Describe the Lead Agency efforts to ensure that Prekindergarten programs meet the eds of working parents:
	Estimated percentage of the MOE Fund requirement that will be met with kindergarten expenditures (not to exceed 20 percent):
iv. I	f the percentage is more than 10 percent of the MOE requirement, describe how
the	state will coordinate its Prekindergarten and child care services to expand the
ava	ilability of child care:
	The same funds are used to meet at least some of the CCDF MOE and TANF MOE quirements.

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i. If known, what percent of funds used to meet CCDF MOE also is used to meet

TANF MOE requirements? 100%

1.6 Public-Private Partnerships

Lead Agencies are required to describe how they encourage public-private partnerships among other public agencies, tribal organizations, private entities, faith-based organizations, businesses or organizations that promote business involvement, and/or community-based organizations to leverage existing service delivery (i.e., cooperative agreement among providers to pool resources to pay for shared fixed costs and operation) (658E(c)(2)(P)). ACF expects these types of partnerships to leverage public and private resources to further the goals of the CCDBG Act. Lead Agencies are required to demonstrate how they encourage public-private partnerships to leverage existing child care and early education service-delivery systems and to increase the supply and quality of child care services for children younger than age 13, for example, by implementing voluntary shared service alliance models (98.14(a)(4)).

1.6.1 Identify and describe any public-private partnerships encouraged by the Lead Agency to leverage public and private resources to further the goals of the CCDBG Act. Include in the response any public-private partnerships that have emerged from the response to the COVID-19 pandemic (98.16(d)(2)) and if applicable, how those partnerships will be continued post-pandemic.

The Lead Agency uses General Revenue to expand the number of Early Head Start (EHS) slots. The competitive bid process requires the bidders to be federal EHS grantees using the federal partnership model that expands EHS through private child care programs. The contracts undergo an annual risk assessment to determine the level of tiered monitoring required to ensure the partner is in compliance with the contract and program goals.

1.7 Coordination With Local or Regional Child Care Resource and Referral Systems

Lead Agencies may use CCDF funds to establish or support a system or network of local or regional child care resource and referral (CCR&R) organizations that is coordinated, to the extent determined by the state/territory, by a statewide public or private non-profit, community-based or regionally based, lead child care resource and referral organization (such as a statewide CCR&R network) (658E(c)(3)(B)(iii); 98.52).

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If Lead Agencies use CCDF funds for local CCR&R organizations, the local or regional CCR&R organizations supported by those funds must, at the direction of the Lead Agency:

- Provide parents in the state with consumer education information concerning the full range of child care options (including faith-based and community-based child care providers), analyzed by provider, including child care provided during non-traditional hours and through emergency child care centers, in their area.
- To the extent practicable, work directly with families who receive assistance to offer the families support and assistance to make an informed decision about which child care providers they will use to ensure that the families are enrolling their children in the most appropriate child care setting that suits their needs and one that is of high quality (as determined by the Lead Agency).
- Collect data and provide information on the coordination of services and supports, including services under Part B, Section 619 and Part C of the Individuals with Disabilities Education Act.
- Collect data and provide information on the supply of and demand for child care services in areas of the state and submit the information to the State.
- Work to establish partnerships with public agencies and private entities, including faith- based and community-based child care providers, to increase the supply and quality of child care services in the state and, as appropriate, coordinate their activities with the activities of the state Lead Agency and local agencies that administer funds made available through CCDF (98.52(b)).

Nothing in the statute or rule prohibits States from using CCR&R agencies to conduct or provide additional services beyond those required by statute or rule.

Note: Use 1.7.1 to address if a state/territory funds a CCR&R organization, describe what services are provided and how it is structured. Use subsection 7.5 to address the services provided by the local or regional child care resource and referral agencies and the indicators of progress met by CCR&R organizations if they are funded by quality set-aside funds.

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1.7.1 Does the Lead Agency fund a system of local or regional CCR&R organizations?

No.	The state/territory	does not fund a	CCR&R	organization(s)	and has no	plans
to e	establish one.					

✓ Yes. The state/territory funds a CCR&R organization(s) with all the responsibilities outlined above. If yes, describe the following:
How are CCR&R services organized? Include how many agencies, if there is a

statewide network, and if the system is coordinated: CCAMO is the state CCR&R contractor. The organization operates under the administration and oversight of a main office located in St. Louis, MO. There are 10 partner agencies located throughout the state. The partner agencies are geographically located to provide services to families and child care providers within and easy driving distance. A map to the partner agency locations may be found at www.mo.childcareaware.org/partner-agencies/. CCAMO has a team of dedicated resource specialist handling phone calls, emails, and live chat requests through their website for families seeking child care referrals and/or child care related information. Additionally, CCAMO prepares and distributes consumer education and referral packet materials throughout communities. Most families (e.g. 75%) searching for child care utilize the online search option, thus the number of phone referrals decrease because the ease of self-service technology is preferred by customers. Due to the decline in phone referrals, all referrals are now conducted from one centralized Resource Center housed in the CCAMO St. Louis office. There are no additional contractors performing referral services at this time. Immediately after referrals are complete, families are provided with a brief survey via a pop-up for online users or live with a Resource Specialist for callers. A week following the referral, a text follow-up is sent to families who have identified a text follow-up is acceptable. The text asks the question "Was the information you received helpful to you?" CCAMO uses location data from online and phone referrals to provide reports of child care referral searches by county to the state quarterly. CCAMO coordinates and/or delivers approved training for child care providers and provides technical assistance, consultation, supply/demand data, and other current resources to employers (including child care providers), community planners, and state agencies. CCAMO also coordinates regional collaboration meetings with child care trainers throughout the state to discuss training needs identified by child care providers and early childhood partners within

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that region, with meetings that have a professional development component and, at least once during the fiscal year, presents a Training Needs Survey. CCAMO oversees contracts with organizations and entities across the state to deliver Capacity Building Services. These partners help to build awareness of the importance of high-quality early childhood education experiences and ensure family awareness of resources, parent education and engagement opportunities, in addition to providing outreach to business and civic leaders to encourage assistance in increasing child care capacity for working families. Nine organizations were selected as capacity building partners for service delivery, including Families and Communities Together (F.A.C.T) in Hannibal, The Family Conservancy in Kansas City, UCP Heartland, in Columbia, United 4 Children in St. Louis, The One Stop for Early Childhood in Springfield, The Community Partnership in Rolla, Southeast Missouri State University (SEMO) in Cape Girardeau, Dunklin County Caring Council in Kennett, and United Way of Greater St. Joseph in St. Joseph.

1.8 Disaster Preparedness and Response Plan

In past disasters, and in response to the COVID-19 pandemic, the provision of emergency child care services and rebuilding and restoring of child care infrastructure has emerged as an essential service. Lead Agencies are required to establish a Statewide Child Care Disaster Plan (658E(c)(2)(U)). They must demonstrate how they will address the needs of children - including the need for safe child care before, during, and after a state of emergency declared by the Governor, or a major disaster or emergency (as defined by Section 102 of the Robert T. Stafford Disaster Relief and Emergency Assistance Act, 42 U.S.C. 5122) - through a Statewide Disaster Plan. The effective date for the establishment of this Statewide Disaster Plan was October 1, 2018.

1.8.1 Did you make any updates to the Statewide Disaster Plan since the FY 2019-2021 CCDF Plan was submitted? Please consider any updates that were made as a result of the Lead Agencyâs experiences in responding to the COVID-19 pandemic. (Note: It is a Lead Agency decision on how often a plan should be updated and which entities, if any, should be collaborated with in the updating process.)

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V	No
	Yes
	If yes, describe the elements of the plan that were updated: Click or tap here to enter
1	text.

1.8.2 To demonstrate continued compliance with the required elements in the Statewide Disaster Plan, certify by checking the required elements included in the current State Disaster Preparedness and Response Plan.

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Proposed -																

- i. State human services agency
- ☑ ii. State emergency management agency
- ☑ iii. State licensing agency
- v. State health department or public health department
- v. Local and state child care resource and referral agencies
- vi. State Advisory Council on Early Childhood Education and Care or similar coordinating body
- ☑ b. The plan includes guidelines for the continuation of child care subsidies.
- ☑ c. The plan includes guidelines for the continuation of child care services.
- ☑ d. The plan includes procedures for the coordination of post-disaster recovery of child care services.
- e. The plan contains requirements for all CCDF providers (both licensed and license-exempt) to have in place:
- i. Procedures for evacuation
- ii. Procedures for relocation
- iii. Procedures for shelter-in-place
- iv. Procedures for communication and reunification with families
- v. Procedures for continuity of operations
- vi. Procedures for accommodations of infants and toddlers
- ✓ vii. Procedures for accommodations of children with disabilities
- viii. Procedures for accommodations of children with chronic medical conditions
- f. The plan contains procedures for staff and volunteer emergency preparedness training.

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g. The plan contains procedures for staff and volunteer practice drills.

1.8.3 If available, provide the direct URL/website link to the website where the statewide child care disaster plan is posted:

https://dss.mo.gov/cd/child-care/files/missouri-childcare-disaster-plan.pdf

2 Promote Family Engagement through Outreach and Consumer Education

Lead Agencies are required to support the role of parents as child care consumers who need information to make informed choices regarding the services that best suit their needs. A key purpose of the CCDBG Act is to "promote involvement by parents and family members in the development of their children in child care settings" (658A(b)). Lead Agencies have the opportunity to consider how information can be provided to parents through the child care assistance system, partner agencies, and child care consumer education websites.

The target audience for the consumer education information includes three groups: parents receiving CCDF assistance, the general public, and when appropriate, child care providers. OCC expects that Lead Agencies are using targeted strategies for each group to ensure tailored consumer education information. In this section, Lead Agencies will address how information is made available to families, the general public and child care providers to assist them in accessing high-quality child care and how information is shared on other financial assistance programs or supports for which a family might be eligible. In addition, Lead Agencies will certify that information on developmental screenings is provided and will describe how research and best practices concerning children's development, including their social-emotional development, is shared.

This section also covers the parental complaint process and the consumer education website that has been developed by the Lead Agency. Finally, this section addresses the consumer statement that is provided to parents supported with CCDF funds.

Note: When asked for citations, responses can include state statute, regulations, administrative

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rules, policy manuals, or policy issuances. See the Introduction on page 4 for more detail.

2.1 Outreach to Families With Limited English Proficiency and Persons With Disabilities

The Lead Agency is required to describe how it provides outreach and services to eligible families with limited English proficiency and persons with disabilities and to facilitate the participation of child care providers with limited English proficiency and child care providers with disabilities in the CCDF program (98.16(dd)). Lead Agencies are required to develop policies and procedures to clearly communicate program information, such as requirements, consumer education information, and eligibility information, to families and child care providers of all backgrounds (81 FR 67456).

2.1.1 Check the strategies the Lead Agency or partners utilize to provide outreach and services to eligible families for whom English is not their first language. Check all that apply.

a. Application in other languages (application document, brochures, provider notices)
☑ b. Informational materials in non-English languages
c. Website in non-English languages
d. Lead Agency accepts applications at local community-based locations
☑ e. Bilingual caseworkers or translators available
☐ f. Bilingual outreach workers
g. Partnerships with community-based organizations
h. Collaboration with Head Start, Early Head Start, and Migrant Head Start
i. Home visiting programs
i. Other.
Describe:

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2.1.2 Check the strategies the Lead Agency or partners utilize to provide outreach and services to eligible families with a person(s) with a disability. Check all that apply.

a. Applications and public informational materials available in Braille and other communication formats for access by individuals with disabilities
c. Caseworkers with specialized training/experience in working with individuals with disabilities
d. Ensuring accessibility of environments and activities for all children
e. Partnerships with state and local programs and associations focused on disability-related topics and issues
f. Partnerships with parent associations, support groups, and parent-to-parent support groups, including the Individuals with Disabilities Education Act (IDEA) federally funded Parent Training and Information Centers
g. Partnerships with state and local IDEA Part B, Section 619 and Part C providers and agencies
h. Availability and/or access to specialized services (e.g. mental health, behavioral specialists, therapists) to address the needs of all children
☑ i. Other.
Describe:
The Lead Agency and the CCR&R contractor utilize TTY to communicate with th

The Lead Agency and the CCR&R contractor utilize TTY to communicate with the hearing impaired.

2.2 Parental Complaint Process

The Lead Agency must certify that the state/territory maintains a record of substantiated parental complaints and makes information regarding such complaints available to the public on request (658E(c)(2)(C); 98.15(b)(3)). Lead Agencies must also provide a detailed description of the hotline or similar reporting process for parents to submit complaints about child care providers; the process for substantiating complaints; the manner in which the Lead Agency maintains a record of substantiated parental complaints; and ways that the Lead Agency makes information on such parental complaints available to the public on request (98.16 (s); 98.32(d)).

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2.2.1 Describe the Lead Agency's hotline or similar reporting process through which parents can submit complaints about child care providers, including a link if it is a Webbased process:

The Lead Agency provides a variety of ways for complaints to be reported on child care providers. Parents can report a complaint via the web at:

https://health.mo.gov/safety/childcare/concerns.php, verbally (in-person or by phone), in writing (mail, email, or fax) or by calling their local child care licensing office. Complaints regarding licensed child care facilities, license-exempt child care facilities, and those child care providers caring for more than six children without a license are investigated by the Section for Child Care Regulation (SCCR). Complaints against license-exempt, exempt from licensure, and unlicensed child care providers who are registered with the Lead Agency to receive payment for child care subsidy services are investigated by the Registered Monitoring contractor.

2.2.2 For complaints regarding all providers, including CCDF providers and non-CCDF providers, describe the Lead Agency's process and timeline for screening, substantiating, and responding to complaints. Describe whether the process includes monitoring, and highlight any differences in processes for CCDF and non-CCDF providers and licensed and license-exempt providers:

Complaints received by the Lead Agency are screened to determine if a substantiated allegation would be a violation of state or federal child care regulations, or if it rises to the level of a child abuse and neglect (CA/N) hotline report. If allegations rise to the level of a CA/N report, then Lead Agency staff reports the complaint to the CA/N hotline and follows the allegation through the investigation process. If the CA/N complaint is determined to be a violation of a state or federal regulation, then the report is assigned to the Child Care Facility Specialist or Team Lead of the monitoring contractor based on geographic region. An investigation into the complaint will only be made if there is a statutory or regulatory issue or health and safety requirement violation. Complaints may be received through the Lead Agency's Section for Child Care Regulation (SCCR) website, by phone or by email. If the complaint does not contain allegations of statute or rule violations, but the complaint contains information that requires a referral(s) to other agencies and/or authorities (e.g., CA/N hotline,

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City Building/Zoning office, local law enforcement, etc.), then the assigned agency staff records the referral, makes comments in the complaint intake, and marks it as a Do Not Investigate. If the complaint contains an allegation of a violation of health and safety requirements, then the Lead Agency's Monitoring Specialist makes an unannounced inspection within 10 working days from the receipt of the complaint. Complaint investigations are filed in the provider's public record. For registered providers, the complaint is available to the public by requesting a hard copy of the substantiated complaint(s) through the Lead Agency's website. Complaints against licensed or license-exempt child care providers are investigated by the Lead Agency. SCCR has staff on phone duty in each district office Monday - Friday from 8:00 am – 5:00 pm to answer questions and receive complaint allegations. Complaints received on licensed, license-exempt, or alleged illegal child care providers are screened by the intake person to determine if the allegation, if substantiated, would be a violation of a state regulation or statute or if it rises to the level of a child abuse and neglect (CA/N) hotline. As mandated reporters, if the allegation(s) rises to the level of a CA/N report, SCCR staff makes a report to the hotline and co-investigates the complaint with the DSS Children's Division Out of Home Investigation (OHI) unit. The SCCR intake person completes an intake form and the supervisor assigns the complaint to a Child Care Facility Specialist (CCFS). SCCR has three complaint priority levels: high, medium, and low. The priority level of the complaint indicates to the CCFS how many days they have to initiate the complaint investigation. High priority complaint investigations are initiated within one workday and include, but are not limited to, the death of a child, immediate danger of death, and allegations that pose an immediate risk or serious physical injury. Medium priority complaints are initiated within five working days and include, but are not limited to, accidental injury, safety or health hazards, and supervision problems. Low priority complaint investigations are initiated within 10 working days and include, but are not limited to, record keeping deficiencies, meal deficiencies, and illegal child care. Complaint investigations are to be investigated and a final disposition sent to the provider within 60 days of receipt of the allegation. Substantiated complaints means the investigation of allegations of statute/rule violations produced evidence, proof, or compelling information to support that the allegations are true. The disposition date is the date that SCCR Supervisor (CCS) or Monitoring Supervisor for the Lead Agency has approved and reviewed all evidence/information required for determining whether or not there is a statute and/or rule violation.

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2.2.3 Certify by describing how the Lead Agency maintains a record of substantiated parental complaints. Highlight any differences in processes for CCDF and non-CCDF providers and licensed and license-exempt providers:

All substantiated complaints on licensed and license-exempt providers, regardless of whether the child care provider is contracted with the Lead Agency, are released to the Show Me Child Care Portal and can be found at: https://healthapps.dhss.mo.gov/childcaresearch/ . The Lead Agency maintains documents of substantiated parental complaints in the child care provider file for child care providers who are registered for CCDF with the Lead Agency. The Lead Agency's SCCR uses a complaint reporting system called Child Care Regulation Information System (CCRIS) to document all complaint investigations, including parental complaints, on licensed and license-exempt providers from intake to final disposition. The system allows staff to enter interviews with staff, parents, children, etc., to document any observations during the investigation and to upload any documents received and reviewed in the course of the investigation. Once a complaint is completed, the SCCR supervisor reviews and approves the complaint. The provider is notified of the complaint disposition and receives a copy of the substantiated complaint investigation. The provider has 10 days to make comments in regard to the substantiated rule violation before the substantiated complaint is released to the public portal. All SCCR substantiated complaints and supporting documents are housed within the CCRIS system and are available upon request.

2.2.4 Certify by describing how the Lead Agency makes information about substantiated parental complaints available to the public; this information can include the consumer education website discussed in section 2.3:

The Lead Agency's SCCR maintains documentation of substantiated complaints within the electronic Child Care Regulation Information System (CCRIS) and are available upon request to the public. All substantiated complaints on licensed and license-exempt providers are released to the Show Me Child Care Portal and can be found at:

https://healthapps.dhss.mo.gov/childcaresearch/. This portal allows individuals to search for a childcare provider and view licensing compliance reports and substantiated complaints for licensed child care providers. For CCDF registered providers, a Registered Provider Search

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tab has been added to the Lead Agency's Consumer Education website, which is available at: https://dss.mo.gov/cd/child-care/, and it includes a link to the Show Me Child Care Provider Search. Individuals wanting to search this type of provider will be directed to an email address where they may request complaint information by provider name. The Lead Agency will email the requester the available information.

2.2.5 Provide the citation to the Lead Agency's policy and process related to parental complaints:

Missouri Code of State Regulations - 13 CSR 35-32.120 Regulatory and Contractual Violations of Registered Child Care Providers located at

https://www.sos.mo.gov/cmsimages/adrules/csr/current/13csr/13c35-32.pdf. Missouri statute (§ 210.203, RSMo)

https://revisor.mo.gov/main/OneSection.aspx?section=210.203&bid=11337&hl=.

2.3 Consumer Education Website

States and territories are required to provide information to parents, the general public, and when applicable, child care providers through a state website, which is consumer-friendly and easily accessible (658E(c)(2)(E)(i)(III) and 98.33 (a)). The website must include information to assist families in understanding the Lead Agencyâs policies and procedures, including licensing child care providers. The website information must also include monitoring and inspection reports for each provider, and the quality of each provider (if such information is available for the provider) (658E(c)(2)(D); 98.33(a)). The website should also provide access to a yearly statewide report on the aggregate number of deaths, serious injuries, and the number of cases of substantiated child abuse that have occurred in child care settings. To help families access additional information on finding child care, the website must include contact information for local child care and resource referral organizations. It must also include information on how parents can contact the Lead Agency and other organizations to better understand the information on the website.

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To certify, respond to questions 2.3.1 through 2.3.10 by describing how the Lead Agency meets these requirements and provide the direct URL/website link to the consumer education website in 2.3.11.

Please note that any changes made to the web links provided below in this section after the CCDF Plan is approved will require a CCDF Plan amendment.

2.3.1 Describe how the Lead Agency ensures that its website is consumer-friendly and easily accessible. (Note: While there is no Federal CCDF definition for easily accessible, Lead Agencies may consider easily accessible websites to be searchable, simple to navigate, written in plain language, and easy to understand.):

The Lead Agency's website is developed in a way that offers topics that are easy to find and links that are specific to families with young children. Content on website pages are written in plain language and pages are easy to navigate for specific audiences (e.g., for families, for professionals).

2.3.2 Describe how the website ensures the widest possible access to services for families that speak languages other than English (98.33(a)):

For users whose primary language is not English, the Lead Agency's website includes a statement that the user can contact the Lead Agency to obtain translation services. If a user requests a written document to be translated in a language other than English, then the Lead Agency posts that translated version on the applicable website as well.

2.3.3 Describe how the website ensures the widest possible access to services for persons with disabilities:

The Lead Agency's website includes an email address to contact the Lead Agency for assistance for users with a disability. The website also provides information for using TTY for the hearing impaired.

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2.3.4 Provide the specific website links to the descriptions of the Lead Agency's processes related to child care.

A required component of the consumer education website is a description of Lead Agency policies and procedures relating to child care (98.33(a) (1)). This information includes a description of how the state/territory licenses child care, a rationale for exempting providers from licensing requirements, the procedure for conducting monitoring and inspections of providers, and the policies and procedures related to criminal background checks.

a. Provide the direct URL/website link to how the Lead Agency licenses child care providers, including the rationale for exempting certain providers from licensing requirements, as described in subsection 5.2

Licensing information can be found at: https://health.mo.gov/safety/childcare/index.php. Missouri statute (§ 210.211, RSMo) exempts certain providers from licensing requirements at: https://revisor.mo.gov/main/OneSection.aspx?section=210.211.

b. Provide the direct URL/website link to the processes for conducting monitoring and inspections of child care providers, as described in subsection 5.4:

Processes for licensed and regulated providers are available at: https://health.mo.gov/safety/childcare/inspection-process.php. Processes for CCDF providers are available at: https://dss.mo.gov/cd/child-care/child-care-providers/.

- c. Provide the direct URL/website link to the policies and procedures related to criminal background checks for staff members of child care providers, as described in 5.5.2. Policy for registered and license-exempt providers is available at: https://dss.mo.gov/cd/child-care/child-care-providers/background-screening.htm. Policy for licensed facilities is available at: https://health.mo.gov/safety/childcare/background-check-process.php.
- d. Provide the direct URL/website link to the offenses that prevent individuals from being employed by a child care provider or receiving CCDF funds, as described in questions 5.5.4:

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Missouri statute (§ 210.1080.4, RSMo) at:

https://www.revisor.mo.gov/main/OneSection.aspx?section=210.1080&bid=48800.

2.3.5 How does the Lead Agency post a localized list of providers searchable by zip code on its website?

The consumer education website must include a list of all licensed providers (98.33 (a)(2)). At the discretion of the Lead Agency, all providers eligible to deliver CCDF services, identified as either licensed or license-exempt, can be included. Providers caring for children to whom they are related do not need to be included. The list of providers must be searchable by ZIP Code.

- a. Provide the website link to the list of child care providers searchable by ZIP code: https://healthapps.dhss.mo.gov/childcaresearch/
- b) In addition to the licensed providers that are required to be included in your searchable list, which additional providers are included in the Lead Agency's searchable list of child care providers (please check all that apply):
 - ☑ i. License-exempt center-based CCDF providers
 - ☑ ii. License-exempt family child care (FCC) CCDF providers
 - ☑ iii. License-exempt non-CCDF providers
 - liv. Relative CCDF child care providers
 - v. Other.

Describe

License-exempt nursery schools.

c) Identify what informational elements, if any, are available in the searchable results. Note: Quality information (if available) and monitoring results are required on the website but are not required to be a part of the search results.

All Licensed Providers

- Contact Information

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Hours, days and months of operation				
Provider education and training				
☐ Languages spoken by the caregiver				
Quality Information				
✓ Monitoring reports				
☐ Willingness to accept CCDF certificates				
Ages of children served				
License-Exempt CCDF Center-based Providers				
✓ Hours, days and months of operation				
Provider education and training				
Languages spoken by the caregiver				
☐ Quality Information				
Monitoring reports				
☐ Willingness to accept CCDF certificates				
Ages of children served				
License-Exempt CCDF Family Child Care Home Providers				
✓ Hours, days and months of operation				
Provider education and training				
Languages spoken by the caregiver				
Quality Information				
✓ Monitoring reports				
☐ Ages of children served				
License-Exempt Non-CCDF Providers				
Contact Information				
Hours, days and months of operation				

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Provider education and training
☐ Languages spoken by the caregiver
Quality Information
✓ Monitoring reports
☐ Willingness to accept CCDF certificates
Ages of children served
Relative CCDF Providers
Contact Information
☐ Enrollment capacity
Hours, days and months of operation
Provider education and training
☐ Languages spoken by the caregiver
Quality Information
Monitoring reports
☐ Willingness to accept CCDF certificates
Ages of children served
2.3.5 How does the Lead Agency post a localized list of providers searchable by zip code on its website?
The consumer education website must include a list of all licensed providers (98.33 (a)(2)). At the discretion of the Lead Agency, all providers eligible to deliver CCDF services, identified as either licensed or license-exempt, can be included. Providers caring for children to whom they are related do not need to be included. The list of providers must be searchable by ZIP Code.
d. Other information included for:
☑ i. All Licensed providers.
Describe
Substantiated complaints and inspection reports to include: compliance monitoring,
close supervision, supplemental, and compliance verification.
ii. License-exempt CCDF center-based providers. Describe

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iii. License-exempt CCDF family child care providers. Describe
iv. License-exempt, non-CCDF providers. Describe
v. Relative CCDF providers. Describe
2.3.6 Lead Agencies must also identify specific quality information on each child care provider for whom they have this information. The type of information provided is determined by the Lead Agency, and it should help families easily understand whether a provider offers services that meet Lead Agency-specific best practices and standards or a nationally recognized, research-based set of criteria. Provider-specific quality information must only be posted on the consumer website if it is available for the individual provider.
a. What information does the Lead Agency provide on the website to determine quality ratings or other quality information?
i. Quality rating and improvement system
☐ ii. National accreditation
iii. Enhanced licensing system
iv. Meeting Head Start/Early Head Start Program Performance Standards
v. Meeting Prekindergarten quality requirements
vi. School-age standards, where applicable
vii. Other.
Describe
In accordance with Missouri statute (§ 161.217, RSMo) at:
https://revisor.mo.gov/main/OneSection.aspx?section=161.217&bid=35248&hl=,
the Lead Agency is piloting a Quality Assurance Report with the goal of providing a continuous quality improvement process for early learning programs and to provide

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families with consumer education about the quality of early learning programs. Information about the pilot is available on this webpage: https://dese.mo.gov/quality-schools/early-learning/quality-assurance-report.

b)	For what types of providers are quality ratings or other indicators of quality available?
	i. Licensed CCDF providers.
	Describe the quality information:
	ii. Licensed non-CCDF providers.
	Describe the quality information:
	iii. License-exempt center-based CCDF providers.
	Describe the quality information:
	iv. License-exempt FCC CCDF providers.
	Describe the quality information:
	v. License-exempt non-CCDF providers.
	Describe the quality information:
	vi. Relative child care providers.
	Describe the quality information:
	vii. Other.
	Describe

The Lead Agency identified programs eligible to participate in the Quality Assurance Report pilot and they are licensed CCDF providers, licensed non-CCDF providers, license-exempt center-based CCDF providers, license-exempt Family Child Care (FCC) CCDF providers, license-exempt non-CCDF providers and providers exempt from licensure and regulation. The Quality Assurance Report pilot provides early learning programs a review of policies and procedure, health and safety practices, child screening and assessment practices, staff qualifications and professional

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development, and classroom environment attributes. A quality review informs the

program of recommended training, coaching, and/or consultation to facilitate continuous quality improvement.

2.3.7 Lead Agencies must post monitoring and inspection reports on the consumer education website for each licensed provider and for each non-relative provider eligible to provide CCDF services. These reports must include the results of required annual monitoring visits, and visits due to major substantiated complaints about a provider's failure to comply with health and safety requirements and child care policies. A full report covers everything in the monitoring visit, including areas of compliance and non-compliance. If the state does not produce any reports that include areas of compliance, the website must include information about all areas covered by a monitoring visit (e.g., by posting a blank checklist used by monitors).

The reports must be in plain language or provide a plain language summary, as defined by the state or territory, and be timely to ensure that the results of the reports are available and easily understood by parents when they are deciding on a child care provider. Lead Agencies must post at least 3 years of reports.

Certify by responding to the questions below:

a	. Does the Lead Agency post? (check one):
	i. Full monitoring reports that include areas of compliance and non-compliance.
	ii. Monitoring reports that include areas of non-compliance only, with information about all areas covered by a monitoring visit posted separately on the website (e.g., a blank checklist used by monitors). Note: This option is only allowable if the state/territory does not produce monitoring reports that include both areas of compliance and non-compliance.
	If checked, provide a direct URL/website link to the website where a blank checklist
	is posted.

b. Check to certify that the monitoring and inspection reports and, if necessary, their plain

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language summaries include:

- Date of inspection
- Health and safety violations, including those violations that resulted in fatalities or serious injuries occurring at the provider.

Describe how these health and safety violations are prominently displayed:

Lead Agency staff ensures inspection reports for licensed child care providers are written with simple descriptions of violations/findings. Violations are visible when viewing the inspection reports. Complaint investigations that include substantiated allegations of fatalities and serious injuries are posted on the Early Childhood website at: https://dss.mo.gov/cd/child-care/ and a report about the death injuries and abuse is available for review by the public at: https://dss.mo.gov/cd/child-care/files/reports-on-deaths-injuries-and-abuse.pdf.

Corrective action plans taken by the state and/or child care provider.

Describe:

When an inspection report is opened for viewing, the viewer will see the violation noted with the rule reference and the correction that is required for compliance. The inspection report also includes how the correction is to be documented and the date that the provider came into compliance with that particular violation. Violations corrected during inspection are noted as corrected onsite in the report. The Lead Agency records all other corrections with a date the provider notifies the Lead Agency of the correction. If a licensed provider does not achieve compliance, then the Lead Agency can initiate disciplinary action.

- ✓ A minimum of 3 years of results, where available.
- c. How and where are reports posted in a timely manner? Specifically, provide the Lead Agency's definition of "timely" and describe how it ensures that reports and/or summaries are posted within its timeframe. Note: While Lead Agencies may define "timely," we recommend Lead Agencies update results as soon as possible and no later than 90 days after an inspection or corrective action is taken.
 - i. Provide the direct URL/website link to where the reports are posted. https://healthapps.dhss.mo.gov/childcaresearch/SearchEngine.aspx
 - ii. Describe how the Lead Agency defines timely posting of monitoring reports.

 The Lead Agency posts inspection reports for licensed and license-exempt facilities

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approximately 10 days after the provider's opportunity to view and comment on the inspection.

- d. Monitoring and inspection reports or the summaries must be in plain language to meet the CCDF regulatory requirements (98.33 (a)(4)).
 - i. Provide the Lead Agency's definition of plain language.

In accordance with the Plain Writing Act of 2010, section 3, when writing monitoring and inspection reports or summaries, the Lead Agency has defined plain language as writing that is clear, concise, well-organized and follows best practices appropriate to the subject and/or the intended audience.

ii. Describe how the monitoring and inspection reports or the summaries are in plain language.

Lead Agency staff write inspection reports with simple descriptions of violations and/or findings from monitoring and inspections.

- e. Describe the process for correcting inaccuracies in reports (98.33 (a)(4)).
- If Lead Agency staff, such as Child Care Facility Specialist or Child Care Supervisor, or a child care provider determines that there is an inaccuracy in the inspection report, then the Lead Agency supervisor makes the correction and sends the provider a corrected inspection report. The Lead Agency provides inspection and monitoring reports to the child care provider 10 days prior to the posting of the report. The child care provider has 10 days to request inaccuracies be corrected and/or to dispute or comment on the report. The report is posted after the 10-day time frame and/or after any inaccuracies are corrected, whichever is later.
- f. Describe the process for providers to appeal the findings in reports. Description of the process should include the time requirements and timeframes for:
- -- filing the appeal
- -- conducting the investigation
- -- removal of any violations from the website determined on appeal to be unfounded.

The Lead Agency does not remove inspection reports from its website. The child care provider has 10 days to request inaccuracies be corrected and/or to dispute or comment on the report. If it is determined the violation is incorrect or unfounded, it is removed from

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the inspection report.

g. Describe the process for maintaining monitoring and inspection reports on the website. Specifically, provide the minimum number of years reports are posted and the policy for removing reports (98.33(a)(4)(iv)).

Inspection and monitoring reports are maintained on the Child Care Provider portal for a minimum of three years. Reports will be removed from the Child Care Provider portal after seven years, or when the facility is no longer in operation.

2.3.8 Aggregate data on serious injuries, deaths, and substantiated cases of child abuse that have occurred in child care settings each year must be posted by Lead Agencies on the consumer education website (98.33(a)(5)). The serious incident aggregate data should include information about any child in the care of a provider eligible to receive CCDF, not just children receiving subsidies.

This aggregate information on serious injuries and deaths must be separated by category of care (e.g. centers, family child care homes, and in-home care) and licensing status (i.e. licensed or license-exempt) for all eligible CCDF providers in the state. The information on instances of substantiated child abuse does not have to be organized by category of care or licensing status. Information should also include the total number of children regulated to be cared for by provider type and licensing status (81 FR, p. 67477), so that families can view the serious injuries, deaths, and substantiated cases of abuse data in context. The aggregate report should not include individual provider-specific information or names.

a. Certify by providing:

i. The designated entity to which child care providers must submit reports of any serious injuries or deaths of children occurring in child care (98.16 (ff)) and describe how the Lead Agency obtains the aggregate data from the entity.

The child care provider is required to report a child death or serious injury within 24 hours using a secure fillable form accessible through the Lead Agency's website for Early Childhood available at:

https://apps.dss.mo.gov/ChildCareFraud/AddSeriousInjuryOrDeath.aspx. Data are gathered from the completed forms submitted by the provider. Once the provider

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submits completed forms, the Lead Agency uses the data to follow up on information provided to determine if further actions need to be taken on the provider's agreement. The Lead Agency logs the data and posts a report annually on the website at: https://dss.mo.gov/cd/child-care/files/reports-on-deaths-injuries-and-abuse.pdf. In addition, aggregated data on child fatalities are gathered through the DSS, Division of Legal Services, State Technical Assistance Team (STAT). STAT works with Child Fatality Review Program in collecting aggregated data on child fatalities occurring within the state. STAT publishes an annual report of the data collected.

ii. The definition of "substantiated child abuse" used by the Lead Agency for this requirement.

The Lead Agency uses Missouri Children's Division's "Preponderance of Evidence" as the definition for substantiated child abuse and neglect reports: "that degree of evidence that is of greater weight or more convincing than the evidence which is offered in opposition to it or evidence which as a whole shows the fact to be proved to be more probable than not."

iii. The definition of "serious injury" used by the Lead Agency for this requirement.

A "serious injury" to a child is one that occurs while the child is at the child care provider, or away from the child care provider's facility but still in the care of the child care provider, and an injury results in the child being treated by a medical professional or admitted to a hospital.

- b. Certify by checking below that the required elements are included in the Aggregate Data Report on serious incident data that have occurred in child care settings each year.
 - i. the total number of serious injuries of children in care by provider category/licensing status
 - ☑ ii. the total number of deaths of children in care by provider category/licensing status
 - iii. the total number of substantiated instances of child abuse in child care settings
 - iv. the total number of children in care by provider category/licensing status
- c. Provide the website link to the page where the aggregate number of serious injuries,

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deaths, and substantiated instances of child abuse are posted.

Aggregate data on injuries, deaths and child abuse cases are available on the Consumer Education website at: https://dss.mo.gov/cd/child-care/. The report data on deaths or serious injuries is reported by provider type, licensed or unlicensed, and by cause of death.

2.3.9 The consumer education website must include contact information on referrals to local child care resource and referral organizations (98.33 (a)(6)). How does the Lead Agency provide referrals to local CCR&R agencies through the consumer education website? Describe and include a website link to this information:

Families seeking information on child care services can go to the Consumer Education website at: https://dss.mo.gov/cd/child-care/, click on "Help for Families," and the site will display a variety of services available to families. By clicking on "Child Care" or "Show Me Child Care Provider Search" the user is able to find a child care provider nearby. A direct link to Child Care Aware of Missouri, the state's resource and referral network, is also available to the user from the Consumer Education website at: https://mo.childcareaware.org/child-care-search/ or at: https://mo.childcareaware.org/partner-agencies/.

2.3.10 The consumer education website must include information on how parents can contact the Lead Agency, or its designee, or other programs that can help the parent understand information included on the website (98.33 (a)(7)). Describe and include a website link to this information:

The Consumer Education website is available at: https://dss.mo.gov/cd/child-care/ and includes contact information for questions and comments to email the Lead Agency at: askcd@dss.mo.gov.

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2.3.11 Provide the website link to the Lead Agency's consumer education website. Note: An amendment is required if this website changes.

https://dss.mo.gov/cd/child-care/

2.4 Additional Consumer and Provider Education

Lead Agencies are required to certify that they will collect and disseminate information about the full diversity of child care services to promote parental choice to parents of eligible children, the general public, and where applicable, child care providers. In addition to the consumer education website, the consumer education information can be provided through CCR&R organizations or through direct conversations with eligibility case workers and child care providers. Outreach and counseling can also be effectively provided via information sessions or intake processes for families (658E(c)(2)(E); 98.15(b)(4); 98.33(b)).

In questions 2.4.1 through 2.4.5, certify by describing:

2.4.1 How the Lead Agency shares information with eligible parents, the general public, and where applicable, child care providers about the availability of child care services provided through CCDF and other programs for which the family may be eligible, such as state Prekindergarten, as well as the availability of financial assistance to obtain child care services. At a minimum, describe what is provided (e.g., such methods as written materials, the website, and direct communications) and how information is tailored for these audiences.

Parents, guardians and the general public may access information on financial assistance for Missouri child care, TANF, Women, Infants and Children (WIC) Program, and other financial supports, information on selecting a child care provider, services for children with special needs, parent education and other early childhood programs and supports through the Lead Agency's website at: https://dss.mo.gov/cd/child-care/ and the FSD's website at: https://mydss.mo.gov. In addition to these websites, written materials are available at a Regional Family Support Division located in every county in the state, and other social

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services agency offices. Additionally, the Lead Agency, in collaboration with the state's CCR&R, is in the process of implementing a Regional Hub Model that provides resources in a designated area in Missouri with a focus on supporting families with children birth to age five. This coordinated support system is designed to ensure families have the knowledge and resources to make informed decisions about the safety, health and education of their children. When fully implemented in 2023, regional hubs will be located throughout the state to improve access for Missouri families and children, including a plan for improved technology and websites, and broader dissemination of information to families and providers on accessing and utilizing services for young children. The ultimate goal of a regional hub model is a coordinated system of early care and education connections with a place for every family to access resources and services that promote safe and healthy learning environments for young children. The Lead Agency's website with information about regional hubs is at: https://earlyconnections.mo.gov/what-we-do/regional-hubs. Regional hub activities are funded by the Preschool Development Grant Birth to Five. The Lead Agency's website for the preschool grant is at: https://dese.mo.gov/quality-schools/earlylearning/PDGB-5.

2.4.2 How does the Lead Agency provide the required information about the following programs and benefits to the parents of eligible children, the general public, and where applicable, providers? Certify by describing for each program listed below, at a minimum, what information is provided, how the information is provided, and how the information is tailored to a variety of audiences. Include any partners who assist in providing this information.

▼ Temporary Assistance for Needy Families program:

The Consumer Education website at: https://dss.mo.gov/cd/child-care/ includes a link to the FSD's application for state benefits. Users can click on "Temporary Assistance" to receive information on the TANF program, apply for TANF, or review frequently asked questions. In addition, there is information available on eligibility, employment and training requirements, ability to calculate benefits, and a printable brochure. Links to information on the availability of TANF services are also on community partners' websites, such as, Educare providers, ParentLink, and Child Care Aware of Missouri.

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The Consumer Education website at: https://dss.mo.gov/cd/child-care/ includes a link to the MO Head Start Association for Early Head Start/Head Start programs. The user can click on this link and access the MO Head Start Association's webpage, which provides information for parents, the general public, and legislators. The parent webpage also offers information on the various services provided to young children and their families.

✓ Low Income Home Energy Assistance Program (LIHEAP):

The Consumer Education website at: https://dss.mo.gov/cd/child-care/ includes a link to the FSD and users can click on "Energy Assistance" to receive information on this program, apply for Energy Assistance, or review frequently asked questions. In addition, there is information available on eligibility, services available for families, and a printable brochure.

☑ Supplemental Nutrition Assistance Programs (SNAP) Program:

The Consumer Education website at: https://dss.mo.gov/cd/child-care/ includes a link to the FSD and users can click on "Food Assistance" to receive information on the SNAP program. Users can download an application, apply for assistance, or review frequently asked questions. In addition, there is information available on food distribution programs, employment and training requirements, and other community resources related to food assistance for families.

Women, Infants, and Children Program (WIC) program:

The Consumer Education website at: https://dss.mo.gov/cd/child-care/ includes a link to the WIC program housed in the DHSS. Users can find information on locations to apply for WIC, income guidelines, and frequently asked questions. The WIC website also offers links to local agencies, health care providers, and a listing of approved foods.

☑ Child and Adult Care Food Program(CACFP):

The Consumer Education website at: https://dss.mo.gov/cd/child-care/ includes a link to CACFP housed in the DHSS. Users can find information on food programs

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available for child care centers, family child care homes, and after school programs.

Medicaid and Children's Health Insurance Program (CHIP):

The Consumer Education website at: https://dss.mo.gov/cd/child-care/ includes a link to the FSD where users can click on "Health Care" to receive information on the different types of health care assistance. For example, if the user clicks on "Kids" it will take them to a page in which the user may apply for Mo HealthNet for children or review frequently asked questions. In addition, users can find information about eligibility, the State's CHIPs program and Non-CHIPs program, and a printable brochure.

✓ Programs carried out under IDEA Part B, Section 619 and Part C:

The Consumer Education website at: https://dss.mo.gov/cd/child-care/ includes a link to the First Steps (Part C) early intervention program, the Early Childhood Special Education (Part B, Section 619) and information about the special education (Part B) process. Users are able to gain information on referral, evaluations, eligibility, and locations for programs and services.

2.4.3 Describe how the Lead Agency makes information available to parents, providers and the general public on research and best practices concerning children's development, including physical health and development, particularly healthy eating and physical activity and information about successful parent and family engagement. The description should include:

- -- what information is provided
- -- how the information is provided
- -- how the information is tailored to a variety of audiences, including:
- parents
- providers
- the general public

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-- any partners in providing this information

Description:

The Lead Agency's website for early childhood programs at:

https://earlyconnections.mo.gov/ is organized by user type to provide information for parents, professionals, and the general public on a variety of topics and includes links to various partners who offer services such as parent education, home visiting, early intervention, Early Head Start, etc. The Lead Agency also maintains an online consumer brochure in a user-friendly format at: https://dss.mo.gov/cd/child-care/files/ConsumerBooklet.pdf. In addition, the Lead Agency is developing a state structure for ensuring providers and families have regular access to and training in Strengthening Families Protective Factors Framework, which will be incorporated into parent and provider education activities once completed.

2.4.4 Describe how information on the Lead Agency's policies regarding the socialemotional and behavioral issues and mental health of young children, including positive behavioral intervention and support models based on research and best practices for those from birth to school age, are shared with families, providers, and the general public. At a minimum, include

- what information is provided,
- how the information is provided, and
- how information is tailored to a variety of audiences, and
- include any partners in providing this information.

Description:

The Lead Agency's policy statement on social-emotional and behavioral health is available at: https://dss.mo.gov/cd/child-care/files/policy-statement-social-emotional-behavior.pdf. This policy statement outlines the agency's position on children's social-emotional and behavioral health and contains information for child care providers to build positive and healthy

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relationships. The policy is reinforced through the Early Childhood Social and Emotional Health training available to child care providers who serve infants, toddlers, preschoolers, and school-age children. Training was developed as an inter-agency collaboration between the Lead Agency, public and private partner agencies, including staff from the DMH's early childhood and infant mental health programs. The training for providers serving school-age children is available as an in-person training upon request, but the training for providers serving infants, toddlers, and preschoolers is available at:

https://health.mo.gov/safety/childcare/training/socialemotional/.

2.4.5 Describe the Lead Agency's policies to prevent the suspension and expulsion of children from birth to age 5 in child care and other early childhood programs receiving CCDF funds (98.16(ee)), including how those policies are shared with families, providers, and the general public.

The Lead Agency's policy statement on exclusionary practices states the use of expulsion and suspension are negative experiences that hinder children's development and learning. It is the policy of the Lead Agency to work toward eliminating expulsion and suspension practices in Missouri's subsidized child care settings. The Lead Agencysupports providers and parents by raising awareness about expulsion, suspension, and other exclusionary disciplinary practices in child care settings, developing a goal-driven process for improvement that is informed by a coordinated data system across early childhood sectors, investing in the workforce development system by assisting providers in establishing preventative disciplinary policies that limit or eliminate the use of expulsion and suspension and promote the use of evidence-based practices, and reviewing and updating policies regarding program quality that are specifically targeted to both increase overall quality or early learning services and reduce or eliminate expulsions, suspensions, and other exclusionary discipline practices. This policy is available at: https://dss.mo.gov/cd/child-care/files/policy-statement-expulsion.pdf.

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2.5 Procedures for Providing Information on Developmental Screenings

Lead Agencies are required to provide information on developmental screenings to parents, the general public and, when applicable, child care providers. Information should include: Existing resources and services that the state can use in conducting developmental screenings and providing referrals to services for children who receive child care assistance. Lead Agencies must also include a description of how a family or child care provider can use these resources and services to obtain developmental screenings for children who receive subsidies and who might be at risk of cognitive or other developmental delays, which can include social, emotional, physical, or linguistic delays (658E(c)(2)(E)(ii)). This information about the resources can include the Early and Periodic Screening, Diagnosis, and Treatment program under the Medicaid program carried out under title XIX of the Social Security Act and developmental screening services available under IDEA Part B, Section 619 and Part C, in conducting those developmental screenings and in providing referrals to services for children who receive subsidies. Lead Agencies are required to provide this information to eligible families during CCDF intake and to child care providers through training and education (98.33(c)). Information on developmental screenings, as other consumer education information, should be accessible for individuals with limited English proficiency and individuals with disabilities.

2.5.1 Certify by describing:

a) How the Lead Agency collects and disseminates information on existing resources and services available for conducting developmental screenings to CCDF parents, the general public, and where applicable, child care providers (98.15(b)(3)).

At the time a family is approved for child care subsidies, DSS FSD staff mail a MO Child Care Consumer Booklet with information on developmental screenings. The booklet is available for download on the consumer education website and available at: https://dss.mo.gov/cd/child-care/files/ConsumerBooklet.pdf. The booklet is available to anyone interested in learning about resources available for conducting developmental screenings and is published in English and Spanish. Additional resources are included for MO HealthNet, which provides information on Early and Periodic Screening, Diagnostic and Treatment (EPSDT), along with links to inclusion services, early childhood special education, and other programs available to assist children with special needs. In addition, the Lead Agency contracts with Child Care Aware of MO and

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ParentLink to assist families with information on child care services for children with special needs.

- b) The procedures for providing information on and referring families and child care providers to the Early and Periodic Screening, Diagnosis, and Treatment program under the Medicaid program carried out under Title XIX of the Social Security Act (42 U.S.C. 1396 et seq.) and developmental screening services available under Section 619 and Part C of the Individuals with Disabilities Education Act (20 U.S.C. 1419, 1431 et seq.). The Consumer Education website at: https://dss.mo.gov/cd/child-care/ includes a section for "Help for Families" and subsequently a link to "Does my child have special needs?" that directs families to information about the EPSDT program through Mo HealthNet at: https://dss.mo.gov/cd/child-care-help-for-families/does-my-child-have-a-special-need.htm. Information on EPSDT is also available in the MO Child Care Consumer Booklet at: https://dss.mo.gov/cd/child-care/files/ConsumerBooklet.pdf, which is mailed to families at the time of approval for child care subsidy. ParentLink provides the Ages & Stages Questionnaire (ASQ) screening for children birth through six years.
- c) How the Lead Agency gives information on developmental screenings to parents receiving a subsidy as part of the intake process. Include the information provided, ways it is provided, and any partners in this work.

DSS FSD staff mail a MO Child Care Consumer Booklet, which has information on developmental screenings, at the time of their approval for child care subsidy. The booklet is also available for download on the Consumer Education website at: https://dss.mo.gov/cd/child-care/files/ConsumerBooklet.pdf. The booklet is also available in a Spanish version.

d) How CCDF families or child care providers receiving CCDF can use the available resources and services to obtain developmental screenings for CCDF children at risk for cognitive or other developmental delays.

DSS FSD staff mail a MO Child Care Consumer Booklet, which has information on developmental screenings, at the time of the family's approval for child care subsidy. The booklet is also available for download on the consumer education website at: https://dss.mo.gov/cd/child-care/files/ConsumerBooklet.pdf. The booklet is also available in Spanish. ParentLink provides posters and brochures for those seeking developmental screenings to Local Public Health Departments and are also distributed to child care

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providers for display in their facilities. All materials contain contact information on how to access locally available services for families and providers who need to have a child referred for a developmental screening.

e) How child care providers receive this information through training and professional development.

The Lead Agency provides trainings on developmental assessments through the Missouri Workshop Calendar. As part of the training, trainers instruct child care providers on how to appropriately refer families to physicians, home visiting programs, or ParentLink for children to obtain developmental screenings. The Lead Agency oversees the Missouri Milestones Matter (MMM) pilot project that aims to explain the importance of routine developmental screenings, best practices, and appropriate screening tools. The pilot project is expanding to statewide training and practices in 2021 as additional trainings and toolkits are provided to more child care providers, as well as home visitors.

f) Provide the citation for this policy and procedure related to providing information on developmental screenings.

The Lead Agency is in the process of developing guidance on appropriate screening tools, timelines, and best practices for developmental screening and monitoring for young children and their families. Because this guidance is under development, it is not currently in formal policy. Once complete, it will be included in the current Child Care Manual for family eligibility as well as the Provider Manual. Citation for the policy and procedure will be available at that time.

2.6 Consumer Statement for Parents Receiving CCDF Funds

Lead Agencies must provide CCDF parents with a consumer statement in hard copy or electronically (such as referral to a consumer education website) that contains specific information about the child care provider they select (98.33 d). Please note that if the consumer statement is provided electronically, Lead Agencies should consider ensuring the statement is accessible to parents, including parents with limited access to the internet, and that parents have a way to contact someone to address their questions.

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2.6.1 Certify by describing:

a. How and when the Lead Agency provides parents receiving CCDF funds with a consumer statement identifying the requirements for providers and the health and safety record of the provider they have selected.

Once approved for child care subsidy, the Lead Agency ensures every parent receives a copy of the consumer booklet in the mail. Twice a month, the Lead Agency runs a report of all new families in the subsidy system and generates the mailings. The consumer booklet provides a website for a parent to locate child care provider's health and safety record on page six of the booklet. The Lead Agency reviews the consumer booklet on a regular basis and updates as needed.

- b. Certify by checking below the specific information provided to families either in hard copy or electronically. Note: The consumer statement must include the eight requirements listed in the table below.
 - ✓ Health and safety requirements met by the provider
 - ✓ Licensing or regulatory requirements met by the provider
 - Date the provider was last inspected
 - Any history of violations of these requirements
 - ☑ Any voluntary quality standards met by the provider
- c. Provide a link to a sample consumer statement or a description if a link is not available.

https://dss.mo.gov/cd/child-care/files/ConsumerBooklet.pdf

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3. Provide Stable Child Care Financial Assistance to Families

3. Provide Stable Child Care Financial Assistance to Families

In providing child care assistance to families, Lead Agencies are required to implement these policies and procedures: a minimum 12-month eligibility and redetermination period, a process to account for irregular fluctuations in earnings, a policy ensuring that families' work schedules are not disrupted by program requirements, policies to provide for a job search of no fewer than 3 months if the Lead Agency exercises the option to discontinue assistance, and policies for the graduated phase-out of assistance. In addition, the Lead Agency is also required to describe procedures for the enrollment of children experiencing homelessness and, if applicable, children in foster care.

Note: Lead Agencies are not prohibited from establishing policies that extend eligibility beyond 12 months to align program requirements. For example, Lead Agencies can allow children enrolled in Head Start, Early Head Start, state or local Prekindergarten, and other collaborative programs to finish the program year or, similarly, parents enrolled in school can have eligibility extended to allow parents to finish their school year. This type of policy promotes continuity for families receiving services through multiple benefit programs.

In this section, Lead Agencies will identify how they define eligible children and families and how the Lead Agency improves access for vulnerable children and families. This section also addresses the policies that protect working families and determine a family's contribution to the child care payment.

Note: When asked for citations, responses can include state statute, regulations, administrative rules, policy manuals or policy issuances. See the Introduction on page 4 for more detail.

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3.1 Eligible Children and Families

3.1 Eligible Children and Families

At the time when eligibility is determined or redetermined, children must (1) be younger than age 13; (2) reside with a family whose income does not exceed 85 percent of the State's median income for a family of the same size and whose family assets do not exceed \$1,000,000 (as certified by a member of said family); and (3)(a) reside with a parent or parents who are working or attending a job training or educational program or (b) receives, or needs to receive, protective services and resides with a parent or parents not described in (3)(a.) (658P(4))); 98.20(a)).

3.1.1 Eligibility criteria: Age of children served

a) The CCDF program serves children
from 0
(weeks/months/years)
through 12
years (under age 13). Note: Do not include children incapable of self-care or under court supervision, who are reported below in (b) and (c).
b) Does the Lead Agency allow CCDF-funded child care for children age 13 and above but below age 19 years who are physically and/or mentally incapable of self-care?(658E(c)(3)(B), 658P(3)) ☐ No ☐ Yes,
and the upper age is 18
(may not equal or exceed age 19).
If yes, Provide the Lead Agency definition of physical and/or mental incapacity: Mental or physical incapacity is a physical or mental condition that limits activities and

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will last, or continue to last, for at least one year or could result in death, as defined by the Social Security Administration; a child identified by a medical professional as having a disability or mental health condition requiring early intervention, special education services, or other specialized services and supports; a child identified by a medical professional as having any physiological disorder or condition, cosmetic disfigurement, or anatomical loss affecting one or more of the following body systems: neurological, musculoskeletal, special sense organs, repertory (including speech organs), cardiovascular, reproductive, digestive, genitourinary, hemic and lymphatic, skin, and endocrine causing a significant delay in a child's cognitive, behavioral, emotional, or social development in comparison with normal development standards.

c) Does the Lead Agency allow CCDF-funded child care for children age 13 and above				
but below age 19 years who are under court supervision? (658P(3), 658E(c)(3)(B))				
□ No.				
✓ Yes				
and the upper age is 18				

- d) How does the Lead Agency define the following eligibility terms?
 - i. "residing with":

(may not equal or exceed age 19)

Residing in the same physical residence/space of a parent, or parents in cases of joint custody. See https://dssmanuals.mo.gov/child-care-manual/appendix-1-glossary/.

ii. "in loco parentis":

A child's guardian or caretaker, relative, or any other person who has assumed responsibility for the day-to-day care and custody of the child while the child is residing with them. See https://dssmanuals.mo.gov/child-care-manual/appendix-1-glossary/.

3.1.2 Eligibility criteria: Reason for care

- a. How does the Lead Agency define the following terms for the purposes of determining CCDF eligibility?
 - i. Define what is accepted as "Working" (including activities and any hour requirements):

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Paid employment that does not include payment of "income in kind." See https://dssmanuals.mo.gov/child-care-manual/appendix-1-glossary/.

ii. Define what is accepted as "Job training" (including activities and any hour requirements):

"Job training" is defined as any formalized training program that prepares individuals for current or emerging occupations. Job training is also any program activity leading a person to employment or a specific type of employment. See https://dssmanuals.mo.gov/child-care-manual/appendix-1-glossary/ https://dssmanuals.mo.gov/child-care-manual/2010-050-15/. Acceptable activities to count toward this definition include, but are not limited to, evaluation for training, job skills training, and work experience. Examples of job training as a valid need for care include, but are not limited to the following: on the job training, training for a Certified Nurse Assistant (CNA), Remedial or basic education provided as a component of a vocational certificate, license or degree, industry skills certifications, unpaid employer sponsored trainings, Limited English Proficiency (LEP) provided as a component of or requirement for a vocational certificate, license or degree, apprenticeships, non-profit sponsored trainings that lead to employment, and other customized training programs. https://dssmanuals.mo.gov/child-care-manual/2010-050-15/. There is no limit on the number of hours that may be counted toward job training as long as it is verified through the participant's training schedule.

iii. Define what is accepted as "Education" (including activities and any hour requirements):

"Education" is defined as participation and enrollment in high school equivalency test (HiSET) or adulteducation and literacy (AEL); participation and enrollment for coursework in English as a Second Language (ESL); participation and enrollment in elementary, junior high, or high school; post-secondary education with the intent to earn an associate degree, bachelor degree, or credits in courses that can transfer to an institution that offers an associate's or bachelor's degree. See https://dssmanuals.mo.gov/child-care-manual/appendix-1-glossary/. There is no limit on the number of hours for participation. The education program must be verified by acceptable documentation and should identify the number of hours for coursework, lab hours, and study time hours (up to one hour per credit hour of enrollment per week). Study time is only allowed for elementary, junior high, high school, post-secondary,

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and online educational needs.

iv. Define what is accepted as "Attending" (a job training or educational program) (e.g. travel time, hours required for associated activities such as study groups, lab experiences, time for outside class study or completion of homework):

The Child Care Manual defines "Attending" under "Authorizing Education" as follows: "(1) If the parent is enrolled in elementary, junior high school, or high school, authorize child care for up to 23 full-time day units to allow the parent to attend classes and study when needed. If the child is a school-age child, authorize based on the school schedule of the child; (2) If the parent is enrolled in AEL, HiSET or ESL classes, authorize child care based on the verified schedule. These classes are not eligible for additional study time; (3) Study time up to one hour per credit hour of enrollment may be allowed each week, in addition to the time in class. Authorize additional study time on an hour for hour basis for required lab work when lab hours are not included in the total credit hours. Study time is only allowed for elementary, junior high, high school, post-secondary and online educational needs; (4) Allow continuous child care when reasonable travel time does not permit the parent to return to the scheduled activity in a timely manner; (5) If the parent is enrolled full-time post-secondary, in class or online, which is 12 or more hours, automatically authorize child care for up to 23 fulltime units to allow the parent to attend classes and study when needed. If the parent is enrolled in evening classes, authorize evening/weekend care as needed. If the child is a school-age child, authorize based on the school schedule of the child; (6) If the online class is only offered at a regularly scheduled time, authorize time when the participant is attending class and study time up to one hour per credit hour of enrollment per week; and (7) If the online class is not offered at a regularly scheduled time, authorize up to one hour per credit hour of enrollment per week for class work if the parent is not enrolled full-time, which is 12 or more hours." See https://dssmanuals.mo.gov/child-care-manual/2010-050-10.

3.1.2 Eligibility criteria: Reason for care

b. Does the Lead Agency allow parents to qualify for CCDF assistance on the basis of education and training without additional work requirements?

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☑ Ye	es
	0,
If no,	describe the additional work requirements.
3.1.2 Eli	gibility criteria: Reason for care
	the Lead Agency provide child care to children who receive, or need to receive re services?
□ No	0.
☑ Ye	es. If yes:
i. F	Provide the Lead Agency's definition of "protective services":
A	child in foster care or receiving preventative services through the Children's
Div	vision. See 13 CSR 35-32.050(31).
not formally services for to children in education/tra definition ab	ral requirements allow other vulnerable children identified by the Lead Agency in child protection to be included in the Lead Agency's definition of protective CCDF purposes. A Lead Agency may elect to provide CCDF-funded child care in foster care when foster care parents are not working or are not in aining activities, but this provision should be included in the protective services love. Are children in foster care considered to be in protective services for the
pu	rposes of eligibility at determination? ☐ No ☑ Yes
wh	Does the Lead Agency waive the income eligibility requirements for cases in nich children receive, or need to receive, protective services on a case-by-case sis (98.20 (a)(3)(ii)(A))? ☑ No ☐ Yes
ed	Does the Lead Agency waive the eligible activity (e.g., work, job training, ucation, etc.) requirements for cases in which children receive, or need to ceive, protective services on a case-by-case basis? No

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☐ Yes
Does the Lead Agency provide respite care to custodial parents of children in rotective services?
▼ No
☐ Yes

3.1.3 Eligibility criteria: Family Income Limits

Note: The questions in 3.1.3 relate to initial determination. Redetermination is addressed in 3.1.8 and 3.2.5.

a. How does the Lead Agency define "income" for the purposes of eligibility at the point of initial determination?

The policy manual defines income as the Adjusted Gross Income - Gross income minus adjustments to income approved by the Division. Gross Income includes, but is not limited to, income from wages, salary, and income from selfemployment, commissions, tips, bonuses, dividends and interest, Social Security benefits, including disability and survivor benefits, pensions and annuities estate income, unemployment and worker's compensation, and alimony and child support. 13 CSR 35-32.050.

b. Provide the CCDF income eligibility limits in the table below at the time of initial determination. Complete columns (i) and (ii) based on maximum eligibility at initial entry into CCDF. Complete columns (iii) and (iv) only if the Lead Agency is using income eligibility limits lower than 85 percent of the current state median income (SMI) at the initial eligibility determination point. If the income eligibility limits are not statewide, please complete the chart below using the most populous area of the state or territory (defined as the area serving highest number of CCDF children) and respond to c. below the table.

	(i)	(ii)	(iii)	(iv)
Family Size	100% of SMI(\$/Month)	85% of SMI (\$/Month) [Multiply (a) by 0.85]		IF APPLICABLE) (% of SMI) [Divide (iii) by (i), multiply by 100] Income Level if Lower Than 85% of Current SMI
1	3,684.85	3,132.12	1,610.00	43.69

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	(i)	(ii)	(iii)	(iv)
2	4,818.65	4,095.85	2,178.00	45.19
3	5,952.45	5,059.58	2,745.00	46.11
4	7,086.25	6,023.31	3,312.00	46.73
5	8,220.05	6,987.04	3,881.00	47.21

c. If the income eligibility limits are not statewide, describe how many jurisdictions set their own income eligibility limits and provide the income limit ranges across the jurisdictions (e.g. range from [lowest limit] to [highest limit])(98.16(i)(3)). Eligibility limits are statewide.

d. SMI source and year. Source is the Bureau of Census current data (2021) at: https://www.acf.hhs.gov/sites/default/files/ocs/comm_liheap_im2002smiattachment_fy20 21.pdf.

Reminder: Reminder: Income limits must be established and reported in terms of current SMI based on the most recent data published by the Bureau of the Census (98.20(a)(2)(i)) even if the federal poverty level is used in implementing the program. SMI quidelines are available at:

https://www.acf.hhs.gov/ocs/resource/liheap-im-2020-02-state-median-income-estimates-for-optional-use-fy2020-and-mandatory-use-fy2021?utm_medium=rss.

e. Identify the most populous area of the state (defined as the area serving the highest number of CCDF children) used to complete the chart in 3.1.3 b.

The most populous area in the state of Missouri is the St. Louis area, as reflected in the provider rate structure. However, the income guidelines per section 3.1.3 b. are based on statewide information rather than the most populous area of the state in order to provide families equitable access to subsidy in all areas of the state.

- f. What is the effective date for these eligibility limits reported in 3.1.3 b? April 1, 2021
- g. Provide the citation or link, if available, for the income eligibility limits. http://dss.mo.gov/cd/childcare/pdf/child-care-income-guidelines.pdf
- 3.1.4 Lead Agencies are required to ensure that children receiving CCDF funds do not have family assets that exceed \$1,000,000, as certified by a family member (98.20(a)(2)(ii)).

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a) Describe how the family member certifies that family assets do not exceed \$1,000,000 (e.g., a checkoff on the CCDF application).

The applicant checks off a box on the CCDF application that states family assets do not exceed \$1,000,000. See 13 CSR 35-32.060(1)(E)2.

b) Does the Lead Agency waive the asset limit on a case-by-case basis for families

defined as receiving, or in need of, protective services?

□ No.
✓ Yes.
If yes, describe the policy or procedure and provide citation:
Protective Services (PS) child care is a purchased child care service for children who
are receiving preventive services or treatment for child abuse or neglect. Children in
Out-of-Home care are also eligible for Protective Services child care. Child care
services may be available to families and children who receive services through the
Children's Division as part of the family's Written Service Agreement, CD-14B, or Child
Assessment and Service Plan, CS-1. The need for child care services must be
documented in the parrative of the child's case record. The Children's Service Worker

Adoption Subsidy and Legal Guardianship Subsidy cases. 1210.030.00 - PROTECTIVE SERVICES CHILD CARE https://dssmanuals.mo.gov/previous-child-care/1210-030-00/.

must document that child care services are needed using the CD-14B, FCS Family

remain eligible for PS child care after the PS case is closed, with the exception of

Assessment Packet in the family's case record. Under no circumstances may a child

3.1.5 Describe any additional eligibility conditions or rules, which are applied by the Lead Agency (98.20(b)) during:

a. eligibility determination.

Eligibility conditions: (1) Applicants must be a parent, specified relative, or a legal guardian of the child and the child residing with the applicant. (2) The child must be between birth and the day up to the child's 13th birthday; or between the age of 13 and 18, or under age 19 and still in school with a special need. (3) The child must be a U.S.

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citizen or a qualified alien. (4) Child must be a Missouri resident with the intent to remain at the time of application and re-application. If an eligibility decision based on the information provided, then the family is asked to complete an interview to gather additional information. 13 CSR 35-32.060

b. eligibility redetermination.

Re-eligibility conditions: (1) Applicants must be a parent, specified relative, or a legal guardian of the child and the child residing with the applicant. (2) The child must be between birth and the day up to the child's 13th birthday; or between the age of 13 and 18, or under age 19 and still in school with a special need. (3) The child must be a U.S. citizen or a qualified alien. (4) Child must be a Missouri resident with the intent to remain at the time of application and re-application. The Lead Agency does not require an interview if the family has received child care subsidy within the last 12 months. 13 CSR 35-32.060

3.1.6 Lead Agencies are required to take into consideration children's development and promote continuity of care when authorizing child care services (98.21(f); 98.16(h)(6)). Lead Agencies are reminded that authorized child care services are not required to be strictly based on the work, training, or education schedule of the parent (98.21 (g)). Check the approaches, if applicable, that the Lead Agency uses when considering children's development and promoting continuity of care when authorizing child care services.

- ☑ a. Coordinating with Head Start, Prekindergarten, other early learning programs, or school-age programs to create a package of arrangements that accommodates parents' work schedules
- ☑ b. Inquiring about whether the child has an Individualized Education Program (IEP) or Individual Family Services Plan (IFSP)
- ☑ c. Establishing minimum eligibility periods greater than 12 months
- d. Using cross-enrollment or referrals to other public benefits
- e. Working with IDEA Part B, Section 619 and Part C staff to explore how services included in a child's IEP or IFSP can be supported and/or provided onsite and in collaboration with child care services

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f. Working with entities that may provide other child support services.
g. Providing more intensive case management for families with children with multiple risk factors;
h. Implementing policies and procedures that promote universal design to ensure that activities and environments are accessible to all children, including children with sensory, physical, or other disabilities
i. Other.
Describe:
3.1.7 Fluctuation in earnings.
Check the processes that the Lead Agency uses to take into account irregular fluctuations in earnings.
✓ Average the family's earnings over a period of time (i.e. 12 months).
■ Request earning statements that are most representative of the family's monthly income.
Deduct temporary or irregular increases in wages from the family's standard income level.
Other.
Describe:
3.1.8 Lead Agencies are required to have procedures for documenting and verifying that
children receiving CCDF funds meet eligibility criteria at the time of eligibility
determination and redetermination (98.68(c)). Lead Agencies should note that there are
no federal requirements for specific documentation or verification procedures. Check the

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information that the Lead Agency documents and verifies at initial determination and

Check all that apply.

Applicant identity.

redetermination and describe, at a minimum, what information is required and how often.

Required at Initial Determination
Required at Redetermination
Describe:
2010.025.00 Citizenship - United States citizenship or qualified alien status is required
for children needing Child Care Subsidy.
Applicant's relationship to the child.
Required at Initial Determination
Required at Redetermination
Describe:
Applicants must be a parent, specified relative, or legal guardian. Documents used to
verify relationship include: birth certificate, birth information available through an
interface with the state's vital statistics system, court orders, or other relationship
verification that may include hospital records, family Bible documentation, or as a last
resort, a third party verification. The household's statement of relationship is accepted
when other sources of verification are not available.
Child's information for determining eligibility (e.g., identity, age, citizen/immigration status).
Required at Initial Determination
Required at Redetermination
Describe:
A child's age, citizenship, and residency information is verified through an interface
with the state's vital statistics system, if the child was born in Missouri. If a child was
not born in Missouri, the child's information can be verified with a birth certificate from
the child's state of birth. Other methods of verification are listed above.
✓ Work.
THE WORK

Describe:

▼ Required at Initial Determination

■ Required at Redetermination

Employment may be verified by pay check stubs, a letter on company letterhead from the employer, a work schedule, system verification through The Work Number, system verification through an interface with Employment Security, or a telephone call to the

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employer.

- Job training or educational program.
- Required at Initial Determination
- Required at Redetermination

Describe:

Participation in job training or an education program may be verified by letter on training program/ educational program letterhead, training program schedule, school schedule, student income verification form, receipts for fees paid to education programs, or a telephone call to someone with the training program or educational program.

- Family income.
- Required at Initial Determination
- Required at Redetermination

Describe:

Income may be verified by pay check stubs, a letter on company letterhead from an employer with wage and hours worked information, system verification through The Work Number, system verification through an interface with Social Security Administration, or system verification through an interface with Employment Security.

- ☑ Household composition.
- Required at Initial Determination
- Required at Redetermination

Describe:

Household composition is verified by applicant statement.

- Applicant residence.
- Required at Initial Determination
- Required at Redetermination

Describe:

Residence is verified by applicant statement.

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✓ Other.
■ Required at Initial Determination
■ Required at Redetermination
Describe:
Need for care is verified to determine the number of units to authorize for child care.
The work schedule may be verified by pay check stub if the pay check stub contains
enough information to determine hours/time of day worked by applicant, a letter on
company/job training/educational program letterhead with hours/time participating in
eligible need component, training program schedule, school schedule, work

program/educational program to verify need.

3.1.9 Which strategies, if any, will the Lead Agency use to ensure the timeliness of eligibility determinations upon receipt of applications? Check all that apply.

scheduled, or a telephone call to someone with the company/job training

 ▼ Time limit for making eligibility determinations Describe length of time: Missouri uses a 15 day processing timeframe for Child Care Subsidy eligibility determinations. ▼ Track and monitor the eligibility determination process Other. Describe: None

3.1.10 Informing parents who receive TANF benefits about the exception to the individual penalties associated with the TANF work requirement.

3.1.10 Informing parents who receive TANF benefits about the exception to the individual penalties associated with the TANF work requirement.

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Lead Agencies are required to inform parents who receive TANF benefits about the exception to the individual penalties associated with the work requirement for any single custodial parent who has a demonstrated inability to obtain needed child care for a child younger than age 6 (98.16(v); 98.33(f)).

Lead Agencies must coordinate with TANF programs to ensure that TANF families with young children will be informed of their right not to be sanctioned if they meet the criteria set forth by the state/territory TANF agency in accordance with Section 407(e)(2) of the Social Security Act.

In fulfilling this requirement, the following criteria or definitions are applied by the TANF agency to determine whether the parent has a demonstrated inability to obtain needed child care.

Note: The TANF agency, not the CCDF Lead Agency, is responsible for establishing the following criteria or definitions. These criteria or definitions are offered in this Plan as a matter of public record.

- a. Identify the TANF agency that established these criteria or definitions: Department of Social Services, Family Support Division (DSS FSD)
- b. Provide the following definitions established by the TANF agency:
 - i. "Appropriate child care":

Per 13 CSR 40-2.315(11)(G)5., "appropriate child care" shall mean an appropriate provider that is: (A) Licensed by the Missouri DHSS; or (B) if exempt from licensure, is registered by the Children's Division."

ii. "Reasonable distance":

To determine whether child care is within reasonable distance, consider the following factors: (1) When the participant does not have independent transportation, but can use public transportation: if the child care available at the appropriate time for the participant's schedule of work or work participation in getting to public transportation is not cost prohibitive, and if the time involved in getting to public transportation, getting to child care, and then to work is reasonable in relationship to the participant's actual hours of work or work participation activity. (2) When the participant has an independent means of transportation, the transportation must include the following: the vehicle or other transportation must be reliable, the participant must be able to

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afford the transportation costs (including the cost of maintaining and insuring the reliability of the transportation), and the commuting time from the participant's home to the child care provider to the work activity must not be more than one hour each way. 13 CSR 40-2.315(1)(G)7

iii. "Unsuitability of informal child care":

Per 13 CSR 40-2.315(11)(G)6., "unsuitability of informal child care" means that "the participant believes the child is at risk of abuse or neglect while being cared for by the provider. A participant shall not be required to use a provider with whom the participant has reason to believe will abuse or neglect the child. If another adult is residing in the household, but the participant does not believe the other adult is suitable, the participant must provide a reasonable statement as to why the other adult(s) is unavailable, or why this adult places the child at risk of abuse or neglect."

iv. "Affordable child care arrangements":

Child care is considered affordable when the cost of care does not exceed 20% of a family's gross income less medical insurance premiums. This 20% includes any sliding fee a family may be required to pay, but does not include federal, state, or local child care subsidy.

c. How are	e parents	who receive	E TANF &	benefits	informed	about the	exception t	o the
individual	penalties	associated	with the	TANF w	ork requi	rements?		

i. In writing

ii. Verbally

iii. Other.

Describe:

d. Provide the citation for the TANF policy or procedure:

The Temporary Assistance/Case Management policy manual, section0255.010.00 Individuals Temporarily Excluded from Participating In Work Activities and 13 CSR 40-2.315, outlines who are temporarily excluded from participating in work activities.

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3.2 Family Contribution to Payments

3.2 Family Contribution to Payments

Lead Agencies are required to establish and periodically revise a sliding-fee scale for CCDF families that varies based on income and the size of the family to determine each family's contribution (i.e., co-payment) that is not a barrier to families receiving CCDF funds (658E(c)(5)). In addition to income and the size of the family, the Lead Agency may use other factors when determining family contributions/co-payments. Questions 3.2.1 through 3.2.4 address co-payments during the initial/entry-eligibility period.

To help families transition off of child care assistance, Lead Agencies may gradually adjust copay amounts for families determined to be eligible under a graduated phase-out. Question 3.2.5 addresses co-payments during the graduated phase-out period.

3.2.1 Provide the CCDF co-payments in the chart below according to family size for one child in care.

a. Complete the chart based on the most populous area of the state or territory (defined as the area serving the highest number of CCDF children, aligned to the response provided in 3.1.3 e).

	(a)	(b)	(c)	(d)	(e)	(f)
Family Size	Lowest initial or First Tier Income Level where family is first charged co-pay (greater than \$0)	What is the monthly copayment for a family of this size based on the income level in (a)?	What percenta ge of income is this co-payment in (b)?	Highest initial or First Tier Income Level before a family is no longer eligible.	What is the monthly copayment for a family of this size based on the income level in (d)?	What percenta ge of income is this co-payment in (d)?
1	0	1.00		2,307	115	5
2	0	1.00		3,122	115	4
3	0	1.00		3,935	115	3
4	0	1.00		4,747	115	2

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	(a)	(b)	(c)	(d)	(e)	(f)
5	0	1.00		5,562	115	2

b. II the shand-lee scale is not statewide (i.e., county-administered state,	 b. If the sliding-fee scale is not statewide (i.e., county- 	-administered states
--	---	----------------------

☑ i. N/A. Sliding fee scale is statewide

ii. Identify the most populous area of the state (defined as the area serving the highest number of CCDF children) used to complete the chart above.

N/A

iii. Describe how many jurisdictions set their own sliding-fee scale (98.16(i)(3)).

N/A

- c. What is the effective date of the sliding-fee scale(s)? 04/01/2021
- d. Provide the link(s) to the sliding-fee scale:

https://dss.mo.gov/fsd/pdf/child-care-monthly-income-guidelines.pdf

3.2.2 How will the family's contribution be calculated, and to whom will it be applied? Check all that apply under a. or b.

☑ a. The fee is a dollar amount and (check all that apply):	
☑ i. The fee is per child, with the same fee for each child.	
ii. The fee is per child and is discounted for two or more children.	
iii. The fee is per child up to a maximum per family.	
iv. No additional fee is charged after certain number of children.	
v. The fee is per family.	
vi. The contribution schedule varies because it is set locally/regional (as indicated in 1.2.1).	lly
Describe:	
☑ vii. Other.	
Describe:	

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	b. The fee is a percent of income and (check all that apply):
	i. The fee is per child, with the same percentage applied for each child.
	ii. The fee is per child, and a discounted percentage is applied for two or more children.
	iii. The fee is per child up to a maximum per family.
	iv. No additional percentage is charged after certain number of children.
	v. The fee is per family.
	vi. The contribution schedule varies because it is set locally/regionally (as indicated in 1.2.1).
	Describe:
	□ vii. Other.
	Describe:
3.2.3 Doe	s the Lead Agency use other factors in addition to income and family size to
	s the Lead Agency use other factors in addition to income and family size to each family's co-payment (658E(c)(3)(B))? Reminder ' Lead Agencies may NOT
determin	
determin	e each family's co-payment (658E(c)(3)(B))? Reminder ' Lead Agencies may NOT of care or amount of subsidy payment in determining copayments (98.45(k)(2)).
determin use cost	e each family's co-payment (658E(c)(3)(B))? Reminder ' Lead Agencies may NOT of care or amount of subsidy payment in determining copayments (98.45(k)(2)).
determin use cost	e each family's co-payment (658E(c)(3)(B))? Reminder ' Lead Agencies may NOT of care or amount of subsidy payment in determining copayments (98.45(k)(2)). No. Yes, check and describe those additional factors below.
determin use cost	e each family's co-payment (658E(c)(3)(B))? Reminder ' Lead Agencies may NOT of care or amount of subsidy payment in determining copayments (98.45(k)(2)). No. Yes, check and describe those additional factors below. a. Number of hours the child is in care.
determin use cost	e each family's co-payment (658E(c)(3)(B))? Reminder ' Lead Agencies may NOT of care or amount of subsidy payment in determining copayments (98.45(k)(2)). No. Yes, check and describe those additional factors below. I a. Number of hours the child is in care. Describe:
determin use cost	e each family's co-payment (658E(c)(3)(B))? Reminder ' Lead Agencies may NOT of care or amount of subsidy payment in determining copayments (98.45(k)(2)). No. Yes, check and describe those additional factors below. a. Number of hours the child is in care.
determin use cost	e each family's co-payment (658E(c)(3)(B))? Reminder ' Lead Agencies may NOT of care or amount of subsidy payment in determining copayments (98.45(k)(2)). No. Yes, check and describe those additional factors below. I a. Number of hours the child is in care. Describe:
determin use cost	e each family's co-payment (658E(c)(3)(B))? Reminder ' Lead Agencies may NOT of care or amount of subsidy payment in determining copayments (98.45(k)(2)). No. Yes, check and describe those additional factors below. a. Number of hours the child is in care. Describe: Fees for half-time and part-time care are less than fees for full-time care. b. Lower co-payments for a higher quality of care, as defined by the
determin use cost	e each family's co-payment (658E(c)(3)(B))? Reminder ' Lead Agencies may NOT of care or amount of subsidy payment in determining copayments (98.45(k)(2)). No. Yes, check and describe those additional factors below. a. Number of hours the child is in care. Describe: Fees for half-time and part-time care are less than fees for full-time care. b. Lower co-payments for a higher quality of care, as defined by the state/territory. Describe:
determin use cost	e each family's co-payment (658E(c)(3)(B))? Reminder ' Lead Agencies may NOT of care or amount of subsidy payment in determining copayments (98.45(k)(2)). No. Yes, check and describe those additional factors below. a. Number of hours the child is in care. Describe: Fees for half-time and part-time care are less than fees for full-time care. b. Lower co-payments for a higher quality of care, as defined by the state/territory. Describe: c. Other.
determin use cost	e each family's co-payment (658E(c)(3)(B))? Reminder ' Lead Agencies may NOT of care or amount of subsidy payment in determining copayments (98.45(k)(2)). No. Yes, check and describe those additional factors below. a. Number of hours the child is in care. Describe: Fees for half-time and part-time care are less than fees for full-time care. b. Lower co-payments for a higher quality of care, as defined by the state/territory. Describe:

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3.2.4 The Lead Agency may waive contributions/co-payments from families whose incomes are at or below the poverty level for a family of the same size (98.45(k)) or for families who are receiving or needing to receive protective services, on a case-by-case basis, as determined for purposes of CCDF eligibility, or who meet other criteria established by the Lead Agency (98.45(k)(4)). Does the Lead Agency waive family contributions/co-payments for any of the following? Check all that apply.

	No, the Lead Agency does not waive family contributions/co-payments.
V	Yes, the Lead Agency waives family contributions/co-payments. If yes, identify and describe which families have their family contributions/co-payments waived.
	a. Families with an income at or below the Federal poverty level for families of the same size.
	Describe the policy and provide the policy citation.

Describe the policy and provide the policy citation.

For all families receiving protective services from DSS Children's Division, the Lead Agency waives the sliding fees. In addition, the child care provider is prohibited from charging any additional fees to the families. 13 CSR 32-32

c. Families meeting other criteria established by the Lead Agency. Describe Describe the policy.

For all children with special needs and families in homeless situations, the Lead Agency waives the sliding fees. 13 CSR 32-32. Beginning June 1, 2021 through September 30, 2022 the Lead Agency will waive sliding fees for all families.

- 3.2.5 Policies and processes for graduated phase-out of assistance at redetermination.
- 3.2.5 Policies and processes for graduated phase-out of assistance at redetermination.

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Lead Agencies that establish initial family income eligibility below 85 percent of state median income (SMI) are required to provide a graduated phase-out of assistance for families whose income has increased above the state's initial income threshold at the time of redetermination but remains below the federal threshold of 85 percent of the state median income (98.21 (b)(1)). Providing a graduated phase-out promotes continuity by allowing for wage growth, allows for a tapered transition out of the child care subsidy program as income increases, and supports

Lead Agencies that provide a graduated phase-out must implement a two-tiered eligibility threshold, with the second tier of eligibility (used at the time of eligibility redetermination) to be set at:

long-term self-sufficiency for families.

At redetermination, a child shall be considered eligible if his or her parents are working or attending a job training or educational program even if their income exceeds the Lead Agency's income limit to initially qualify for assistance as long as their income does not exceed the second tier of eligibility (98.21(a); 98.21(b)(1)). Note that once deemed eligible, the family shall be considered eligible for a full minimum 12-month eligibility period, even if their income exceeds the second tier of eligibility during the eligibility period, as long as it does not exceed 85 percent of SMI.

A family eligible for services via the graduated phase-out of assistance is considered eligible under the same conditions as other eligible families with the exception of the co-payment restrictions, which do not apply to a graduated phase-out. To help families transition off of child care assistance, Lead Agencies may gradually adjust copay amounts for families whose children are determined eligible under a graduated phase-out and may require additional reporting on changes in family income. However, Lead Agencies must still ensure that any additional reporting requirements do not constitute an undue burden on families.

Lead Agencies that establish initial family income eligibility below 85 percent of state median income (SMI) are required to provide a graduated phase-out of assistance for families whose income has increased above the state's initial income threshold at the time of redetermination but remains below the federal threshold of 85 percent of the state median income (98.21 (b)(1)). Providing a graduated phase-out promotes continuity by allowing for wage growth, allows for a tapered transition out of the child care subsidy

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program as income increases, and supports long-term self-sufficiency for families.

 a. Check and describe the option that best identifies the Lead Agency's policies and procedures regarding the graduated phase-out of assistance.
N/A. The Lead Agency sets its initial eligibility threshold at 85 percent of SMI and therefore, is not required to provide a graduated phase-out period. (If checked, skip to subsection 3.3)
The Lead Agency sets the second tier of eligibility at 85 percent of SMI.
A. Describe the policies and procedures.
B. Provide the citation for this policy or procedure.
The Lead Agency sets the second tier of eligibility at an amount lower than 85 percent of SMI for a family of the same size but above the Lead Agency's initial eligibility threshold.
A. Provide the income level for the second tier of eligibility for a family of three:
\$3,935

- B. Describe how the second eligibility threshold:
 - 1. Takes into account the typical household budget of a low-income family: The gradual phase out process begins at the Transitional Child Care (TCC) levels. The TCC level begins at 138% of the Federal Poverty Level. This allows households at a low-income to earn income gradually and still be eligible for services.
 - 2. Is sufficient to accommodate increases in family income over time that are typical for low-income workers and that promote and support family economic stability:

Transitional Child Care (TCC) is the gradual phase out process for families experiencing an increase in income. An eligibility unit may be allowed a gradual phase out of child care assistance if the family entered at the Traditional Child Care level, and their income has increased but remains less than the upper income limit for the highest level of transitional care. 13 CSR 35-32.060

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3. Reasonably allows a family to continue accessing child care services without unnecessary disruption:

Income increases under 85% of the SMI for the household size do not adversely affect a family's eligibility, meaning they continue to receive the same benefit while receiving TCC. If income decreases and a change is of a benefit to the family, such as decreasing their sliding fee, then the income change is acted on immediately. If an income change will negatively impact the family, such as increasing their sliding fee, then the income change is not acted upon until the next eligibility redetermination period.

4. Provide the citation for this policy or procedure related to the second eligibility threshold:

https://dssmanuals.mo.gov/child-care-manual/2010-045-00/

3.2.5 b. To help families transition from assistance, does the Lead Agency gradually adjust co-payments for families eligible under the graduated phase-out period?

□ No

✓ Yes

i. If yes, describe how the Lead Agency gradually adjusts copayments for families under a graduated phase-out.

The Lead Agency currently has two additional phase-out periods for TCC level A, which is payment for 80% of the state base rate and for TCC level B, which is payment for 60% of the state base rate. The parent is responsible for paying more of the state base rate in each phase-out period as the parent's income increases. Note, currently, the Lead Agency has a waiver from ACF OCC that was approved through May 1, 2021 to allow entry into the gradual phase out, without first being eligible for traditional child care subsidy. This was requested in response to the COVID-19 pandemic. The Lead Agency has submitted an additional request to continue this waiver through December 31, 2021, and upon approval, starting January 2022, the Lead Agency will return to a gradual phase-out with only levels A and B.

ii. If yes, does the Lead Agency require additional reporting requirements during the

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graduated	d phase-out period? (Note: Additional reporting requirements are also
discussed	in section 3.4.3 of the plan.)
☑ No.	
☐ Yes	S.
Describ	oe:

3.3 Increasing Access for Vulnerable Children and Families

3.3 Increasing Access for Vulnerable Children and Families

Lead Agencies are required to give priority for child care assistance to children with special needs, which can include vulnerable populations, in families with very low incomes and to children experiencing homelessness (658E(c)(3)(B); 98.46(a)). The prioritization of CCDF assistance services is not limited to eligibility determination (i.e., the establishment of a waiting list or the ranking of eligible families in priority order to be served).

Note:

CCDF defines "child experiencing homelessness" as a child who is homeless, as defined in Section 725 of Subtitle VII-B of the McKinney-Vento Act (42 U.S.C. 11434a) (98.2).

3.3.1 Describe how the Lead Agency defines:

a) "Children with special needs":

In Missouri, a child with special needs is under the age of 19 and has a significant, diagnosed mental or physical condition which renders the child physically or mentally incapable of caring for himself or herself without supervision appropriate to the child's age or is under court supervision. Children classified as having special needs continue to be a priority for the agency. Child care rates for children classified as having special needs are paid at the rate of the child's "functional age," and child care providers providing care to children classified as having special needs are paid a 25% rate differential.

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b) "Families v	with very low incomes":
Families with SMI.	very low incomes are defined as families with income less than 15% of the
3.3.2 Identify how following children	the Lead Agency will prioritize or target child care services for the and families:
in question 3.2.4. Page 1	coayments is checked, Lead Agencies will need to provide further information aying higher rates for accessing higher quality care is addressed in 4.3.3 contracts to reserve spots is addressed in 4.1.6.
a) Indicate ho	ow the identified populations are prioritized or targeted.
i. Indicate ho apply:	w services are prioritized for children with special needs. Check all that
Prioritiz	ze for enrollment in child care services
Serve	without placing on waiting list
✓ Waive	co-payments (on a case-by-case basis). As described in 3.2.4
Pay hiç	gher rate for access to higher quality care
☐ Using (grants or contracts to reserve spots
ii. Indicate ho apply:	w services are prioritized for families with very low incomes. Check all that
Prioritiz	ze for enrollment in child care services
Serve	without placing on waiting list
✓ Waive	co-payments (on a case-by-case basis). As described in 3.2.4
Pay hig	gher rate for access to higher quality care
☐ Using (grants or contracts to reserve spots
iii. Indicate ho	ow services are prioritized for children experiencing homelessness, as

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defined by the CCDF. Check all that apply:

Prioritize for enrollment in child care services

☑ Serve without placing on waiting list
Waive co-payments (on a case-by-case basis). As described in 3.2.4
Pay higher rate for access to higher quality care
☐ Using grants or contracts to reserve spots
iv. Indicate how services are prioritized, for families receiving TANF, those attempting to transition off TANF, and those at risk of becoming dependent on TANF (98.16(i)(4)). Check all that apply:
Prioritize for enrollment in child care services
☑ Serve without placing on waiting list
☐ Waive co-payments (on a case-by-case basis). As described in 3.2.4
Pay higher rate for access to higher quality care
☐ Using grants or contracts to reserve spots
b. If applicable, identify and describe any other ways the identified populations in the
table above are prioritized or targeted.

Special Needs: A child classified with having a special need is a valid need if there is no other traditional need for care in the household as long as a certified physician, psychologist, psychiatrist, licensed clinical social worker, licensed professional counselor, nurse practitioner, or physician's assistant provides an annual statement verifying the special need for child care, as indicated in the Child Care Subsidy program manual at: https://dssmanuals.mo.gov/child-caremanual/2010-020-00/. A child is authorized in the Child Care Subsidy program is based on the medical professional statement that includes the reason care is needed, the number of hours of care needed per day, the number of days per week child care is needed, and the anticipated duration of the need for care. Very Low income: For families with very low incomes, the sliding fee is no more than \$1.00 per child per year. The full child care rate is paid to the subsidy provider. Homelessness: Homelessness has been defined as a valid need for child care. A family claiming homelessness as a valid need must participate in a communitybased program designed to eliminate the homelessness situation. Homeless shelters, domestic violence shelters, Head Start programs, EHS programs, and other community based organizations may offer programs and resources to help families end homelessness. Eligibility specialists must verify that the eligibility unit participates in activities with the community based program. Verification may include, but is not limited to, a hard copy document or collateral contact

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verification or with a telephone call to the community organization to verify participation. If the family is participating in a community-based program designed to eliminate the homeless situation, child care is authorized up to 23 full-time units. If the child is a school-age child, child care is authorized based on the school schedule of the child.

3.3.3 List and define any other priority groups established by the Lead Agency.

Families receiving protective services from DSS Children's Division, as defined in 3.1.2c of this plan.

3.3.4 Describe how the Lead Agency prioritizes services for the additional priority groups identified in 3.2.3.

For all families receiving protective services from DSS Children's Division, the Lead Agency waives the sliding fees. In addition, the child care provider is prohibited from charging any additional fees to the families.

3.3.5 Lead Agencies are required to expend CCDF funds to (1) permit the enrollment (after an initial eligibility determination) of children experiencing homelessness while required documentation is obtained, (2) provide training and technical assistance to child care providers and the appropriate Lead Agency (or designated entity) staff on identifying and serving homeless children and families (addressed in section 6), and (3) conduct specific outreach to homeless families (658E(c)(3); 98.51).

- a. Describe the procedures to permit the enrollment of children experiencing homelessness while required documentation is obtained.
- (1) When families are found to be eligible for child care subsidy, homelessness is a valid need for child care and children are authorized for 23 full-time days while parents obtain

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documentation to verify homelessness. Legislation went into effect August 28, 2018, allowing for a 30-day grace period to allow families to secure immunizations or documentation of immunizations, as per Missouri statute (§ 210.003.2(3), RSMo) at: https://revisor.mo.gov/main/OneSection.aspx?section=210.003. Providers were notified of the policy via email. (2) The Missouri Workshop Calendar, maintained by Child Care Aware of Missouri offers child care professionals a variety of trainings on working with families experiencing homelessness. In addition, Educare contractors, who serve registered providers, provide annual support group activities related to serving homeless families. (3) Outreach is conducted through participation in the Governor's Committee to Eliminate Homelessness. Participation includes conducting annual trainings for providers of homeless services and providing trainings on applying for child care benefits to social services agencies.

b. Check, where applicable, the procedures used to conduct outreach for children experiencing homelessness (as defined by CCDF Rule) and their families.
i. Lead Agency accepts applications at local community-based locations
☑ ii. Partnerships with community-based organizations
☑ iii. Partnering with homeless service providers, McKinney-Vento liaisons, and others who work with families experiencing homelessness to provide referrals to child care
iv. Other

Note: The Lead Agency shall pay any amount owed to a child care provider for services provided as a result of the initial eligibility determination, and any CCDF payment made prior to the final eligibility determination shall not be considered an error or improper payment (98.51(a)(1)(ii)).

3.3.6 Lead Agencies must establish a grace period that allows homeless children and children in foster care to receive CCDF assistance while providing their families with a reasonable time to take any necessary actions to comply with immunization and other health and safety requirements (as described in section 5). The length of such a grace period shall be established in consultation with the state, territorial, or tribal health agency (658E(c)(2)(I)(i)(I); 98.41(a)(1)(i)(C)).

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Note:

Any payment for such a child during the grace period shall not be considered an error or improper payment (98.41(a)(1)(i)(C)(2)).

a) Describe procedures to provide a grace period to comply with immunization and other health and safety requirements, including how the length of the grace period was established in consultation with the state, territorial, or tribal health agency for:

Children experiencing homelessness (as defined by Lead Agency's CCDF)

Any child who is homeless or in the custody of the Children's Division and cannot provide satisfactory evidence of the required immunizations may be enrolled in child care. As noted above, § 210.003.2(3), RSMo, provides that "[s]atisfactory evidence shall be presented within thirty days of enrollment and shall confirm either that the child has completed all immunizations appropriate for his or her age or has begun the process of immunization. If the child has begun the process of immunization, he or she may continue to attend as long as the process is being accomplished according to the schedule recommended by the Department of Health and Senior Services". Missouri law does not require immunization records for child care programs that serve fewer than 10 children so this is not a barrier for enrollment.

Provide the citation for this policy and procedure.

Children who are in foster care.

For licensed child care centers, group homes, and family child care homes, a child who has not completed all immunizations appropriate for his/her age may enroll, if satisfactory evidence is produced demonstrating that the child has begun the process of immunization. The child may continue to attend as long as the immunization process is being accomplished according to the ACIP/Missouri Department of Health recommended schedule

Provide the citation for this policy and procedure.

b) Describe how the Lead Agency coordinates with licensing agencies and other relevant state, territorial, tribal, and local agencies to provide referrals and support to help families with children receiving services during a grace period comply with immunization and other health and safety requirements (98.41(a)(1)(i)(C)(4)).

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Under the Office of Childhood, the Lead Agency will be the child care licensing agency. The Lead Agency's Early Connections website at: https://earlyconnections.mo.gov/, is designed specifically for parent and professional resources. On this site, under the Families tab, there is a link to the DHSS' Healthy Living website that provides information on immunizations. In addition, there is a link to a Directory of Local Public Health Agencies that provide immunizations for children

c) Does the Lead Agency establish grace periods for other child	en who	are	not
experiencing homelessness or in foster care?			

N	lo.

Yes.

Describe:

3.4 Continuity for Working Families

3.4.1 Minimum 12-month eligibility.

3.4.1 Minimum 12-month eligibility.

The Lead Agency is required to establish a minimum 12-month eligibility and redetermination period:

regardless of changes in income. Lead Agencies may not terminate CCDF assistance during the minimum 12-month period if a family has an increase in income that exceeds the state's income eligibility threshold but not the federal threshold of 85 percent of state median income (SMI).regardless of temporary changes in participation in work, training, or educational activities (658E(c)(2)(N)(i) and (ii)). The Lead Agency may not terminate assistance prior to the end of the minimum 12-month period if a family experiences a temporary job loss or a temporary change in participation in a training or educational activity. Any temporary change cannot have a time limit (e.g. 60 days, 90 days, etc.). A temporary change in eligible activity includes, at a minimum:

any time-limited absence from work for an employed parent due to such reasons as the need to care for a family member or an illnessany interruption in work for a seasonal worker who is not workingany student holiday or break for a parent participating in a training or educational programany reduction in work, training, or education hours, as long as the parent is still working or attending a training or educational programany other cessation of work or attendance at a

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training or educational program that does not exceed 3 months or a longer period of time established by the Lead Agencya child turning 13 years old during the minimum 12-month eligibility period (except as described in 3.1.1)any changes in residency within the state, territory, or tribal service area

a. Describe the Lead Agency's policies and procedures related to providing a minimum 12-month eligibility period at initial eligibility determination and redetermination and provide a citation for these policies or procedures.

Families receiving Child Care Subsidy are determined eligible for a period of 12 months. Authorizations for child care are entered for the entire eligibility period. This policy can be found in the Child Care Manual 2020.005.00: Authorizations. Families are required to report any changes in income or temporary changes in employment, training, education, or homelessness. Families are only required to report limited, specific changes (child leaves home, income increase over 85% of the SMI, child care need has ended without further need, no eligible child remains in the home; eligibility unit has not paid sliding fees to a child care provider; or eligibility unit has an active claim and has not entered into a repayment agreement or the eligibility unit is not making payments on an agreement plan.). The eligibility system has been updated to only accept changes that would increase the family benefit. The eligibility specialist will disregard all known changes that are not required to be reported unless the benefit will be increased or until the eligibility unit reapplies for Child Care Subsidy. 2030.005.00 This policy can be found in the Child Care Manual 2030.000.00: Simplified Reporting.

The Lead Agency is required to establish a minimum 12-month eligibility and redetermination period

- b. Describe and provide the citation for each of the minimum required elements listed below that are included in the Lead Agency's definition of "temporary change".
 - ☑ i. Any time-limited absence from work for an employed parent due to such reasons as the need to care for a family member or an illness.

Describe or define your Lead Agency's policy:

"Child Care authorizations may continue if the eligibility unit is enrolled in a valid need and a temporary change occurs. Temporary changes that could occur include but are not limited to: . . . 5. Medical leave. . ."

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Citation:

2020.005.00 AUTHORIZATIONS

☑ ii. Any interruption in work for a seasonal worker who is not working.

Describe or define your Lead Agency's policy:

"Child Care authorizations may continue if the eligibility unit is enrolled in a valid need and a temporary change occurs. Temporary changes that could occur include but are not limited to: ...2. Temporary factory shut-down; 3. Scheduled employer closings. . .".

Citation:

2020.005.00 AUTHORIZATIONS

iii. Any student holiday or break for a parent participating in a training or educational program.

Describe or define your Lead Agency's policy:

"Child Care authorizations may continue if the eligibility unit is enrolled in a valid need and a temporary change occurs. Temporary changes that could occur include but are not limited to: .) Winter or Spring break from school; 2. Temporary factory shut-down; 3. Scheduled employer closings; 4. Vacation. . ."

Citation:

2020.005.00 AUTHORIZATIONS

☑ iv. Any reduction in work, training, or education hours, as long as the parent is still working or attending a training or educational program.

Describe or define your Lead Agency's policy:

"Child Care authorizations may continue if the eligibility unit is enrolled in a valid need and a temporary change occurs. Temporary changes that could occur include but are not limited to: 1. Winter or Spring break from school; 2. Temporary factory shut-down; 3. Scheduled employer closings. . ."

Citation:

2020.005.00 AUTHORIZATIONS

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v. Any other cessation of work or attendance at a training or educational program that does not exceed 3 months or a longer period of time established by the Lead Agency.

Describe or define your Lead Agency's policy:

"A job search period is a valid need for participants who have an active Child Care Subsidy case. A parent may use job search as a need for 90 days or until the last day of the month in which the 90th day falls as long as the parent continues to meet other eligibility requirements. The parent may not use multiple need losses to count towards a longer job search period."

Citation:

2010.050.20 VALID NEED FOR CHILD CARE SUBSIDY: Job Search

vi. A child turning 13 years old during the minimum 12-month eligibility period (except as described in 3.1.1).

Describe or define your Lead Agency's policy:

Simplified reporting allows a 13 year old child without special needs to continue receiving benefits until the end of the EU's eligibility period. If the child does not have a documented special need, the child will not be eligible for additional benefits if the EU reapplies at the end of the determination period. 2030.065.00 Change in the Age of a Child.

Citation:

2030.065.00 Change in the Age of a Child

vii. Any changes in residency within the state, territory, or tribal service area.

Describe or define your Lead Agency's policy:

"Families are required to report a change of address. If the eligibility unit moves and does not notify the local FSD resource center of the new address, no adverse action is taken."

Citation:

2030.035.00 ADDRESS CHANGES

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 c. Provide any other elements included in the state's definition of "temporary change", including those implemented during the pandemic, and provide the citation.
 N/A

3.4.2 Continuing assistance for "job search" and a Lead Agency's option to discontinue assistance during the minimum 12-month eligibility period.

- a. Does the Lead Agency consider seeking employment (engaging in a job search) an eligible activity at initial eligibility determination (at application) and at the minimum 12-month eligibility redetermination? (Note: If yes, Lead Agencies must provide a minimum of three months of job search.)
- 3.4.2 Continuing assistance for "job search" and a Lead Agency's option to discontinue assistance during the minimum 12-month eligibility period.

Lead Agencies have the option, but are not required, to discontinue assistance during the minimum 12-month eligibility period due to a parent's non-temporary

loss of work or cessation of attendance at a job training or educational program, otherwise known as a parent's eligible activity.

If the Lead Agency chooses the option to discontinue assistance due to a parent's non-temporary loss or cessation of eligible activity, it must continue assistance at least at the same level for a period of not fewer than 3 months after each such loss or cessation. This time period allows the parent to engage in a job search and to resume work or resume attendance in a job training or educational program. At the end of the minimum 3-month period of continued assistance, if the parent has engaged in a qualifying work, training, or educational program activity with an income below 85 percent of state median income (SMI), assistance cannot be terminated, and the child must continue receiving assistance until the next scheduled redetermination or, at the Lead Agency option, for an additional minimum 12-month eligibility period.

No.
Yes.

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If yes, describe the policy or procedure (including any differences in eligibility at initial eligibility determination vs. redetermination of eligibility):

2010.050.20 (1) Job Search: A job search period is a valid need for participants who have an active Child Care Subsidy case. A parent may use job search as a need for 90 days, or until the last day of the month in which the 90th day falls, as long as the parent continues to meet other eligibility requirements. The parent may not use multiple need losses to count towards a longer job search period. (2) Verification of Job Search: If a parent is using job search because of a recent job loss, staff must verify the job loss from the source. If a parent is using job search because an education or training ended, then staff does not need to verify the source. (3) Authorizing Job Search: If the parent is participating in job search, then staff will authorize child care based on the parent's need for day time units only. Staff will authorize up to 90 days or the last day of the month, whichever the 90th day falls on.

- b. Does the Lead Agency discontinue assistance during the minimum 12-month eligibility period due to a parent's non-temporary loss or cessation of eligible activity and offer a minimum 3-month period to allow parents to engage in a job search and to resume participation in an eligible activity?
 - No, the state/territory does not discontinue assistance during the 12-month eligibility period due to a parent's non-temporary loss of work or cessation of attendance at a job training or educational program.
 - Yes, the Lead Agency discontinues assistance during the 12-month eligibility period due to a parent's non-temporary loss of work or cessation of eligible activity and provides a minimum 3-month period of job search. If yes:
 - i. Provide a summary describing the Lead Agency's policies and procedures for discontinuing assistance due to a parent's non-temporary change:

Circumstances for discontinuing assistance due to a parent's non-temporary change include: (1) gross monthly income exceeding 85% of the SMI for the household size; (2) child care need has ended without another need; (3) no eligible child remains in the home; (4) eligibility unit has not paid sliding fees to a child care provider; or (5) eligibility unit has an active claim and has not entered into a repayment agreement or the eligibility unit is not making payments on an agreement plan. Upon notification of the non-temporary change, eligibility would end at the end of the service month.

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ii. Describe what specific actions/changes trigger the job-search period after each such loss or cessation:

Actions/changes that trigger the job-search period after each such loss or cessation include when a parent eligible for Child Care Subsidy reports (or it is discovered) the loss of employment or the discontinuation of an educational program.

iii. How long is the job-search period (must be at least 3 months)?

The job-search period begins on the date of loss of need and continues until the last day of the third full service month.

iv. Provide the citation for this policy or procedure.

This citation can be found in the Child Care Manual 2010.050.20 Job Search: "A job search period is a valid need for participants who have an active Child Care Subsidy case. A parent may use job search as a need for 90 days, or until the last day of the month in which the 90th day falls, as long as the parent continues to meet other eligibility requirements. The parent may not use multiple need losses to count towards a longer job search period." Verification of Job Search: "If a parent is using job search because of a recent job loss, verify the job loss from the source. If a parent is using job search because an education or training ended, you do not need to verify the source." Authorizing Job Search: "If the parent is participating in job search, authorize child care based on the parent's need for day time units only. Authorize up to 90 days or the last day of the month, whichever the 90th day falls."

c. The Lead Agency may discontinue assistance prior to the next minimum 12-month
redetermination in the following limited circumstances. Check and describe any
circumstances in which the Lead Agency chooses to discontinue assistance prior to the
next minimum 12-month redetermination. Check all that apply.
i. Not applicable.
ii. Excessive unexplained absences despite multiple attempts by the Lead Agency or designated entity to contact the family and provider, including the prio notification of a possible discontinuation of assistance.
A. Define the number of unexplained absences identified as excessive:

B. Provide the citation for this policy or procedure:

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☑ iii. A change in residency outside of the state, territory, or tribal service area.

Provide the citation for this policy or procedure:

According to the Child Care Manual 2010.030.00 RESIDENCY, "[t]he individual must be a Missouri resident with the intent to remain at the time of application and reapplication."

iv. Substantiated fraud or intentional program violations that invalidate prior determinations of eligibility.

Describe the violations that lead to discontinued assistance and provide the citation for this policy or procedure.

Per Missouri statute (§§ 205.967 and 570.095, RSMo), any benefits paid to or on behalf of an ineligible participant are recoverable as a debt due the state through a civil or criminal prosecution action. Citations:

https://revisor.mo.gov/main/OneSection.aspx?section=205.967 and https://revisor.mo.gov/main/OneSection.aspx?section=570.095. There are also two rules regarding collection overpayments (i.e., 13 CSR 35-32.100 Participant Overpayments and 13 CSR 35-32.110 Child Care Provider Overpayments) that include administrative action by the agency to recover the overpayments.

3.4.3 Change reporting during the minimum 12-month eligibility period.

3.4.3 Change reporting during the minimum 12-month eligibility period.

The Lead Agency must describe the requirements for parents to report changes in circumstances during the 12-month eligibility period and describe efforts to ensure that such requirements do not place an undue burden on eligible families, which could impact the continuity of care for children and stability for families receiving CCDF services (98.21 (e)).

Note: Responses should exclude reporting requirements for a graduated phase-out, which were described in question 3.2.5 b.

Families are required to report a change to the Lead Agency at any time during the 12-month

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eligibility period if the family's income exceeds 85 percent of the state median income, taking into account irregular fluctuations in income (98.21(e)(1)). If the Lead Agency chooses the option to terminate assistance, as described in section 3.4.2 of the Plan, they may require families to report a non-temporary change in work, training or educational activities (otherwise known as a parent's eligible activity).

a. Does the Lead Agency require families to report a non-temporary change in a parent's eligible activity?
□ No
▼ Yes
b. Any additional reporting requirements during the 12-month eligibility period must be limited to items that impact a family's eligibility (e.g., income changes over 85 percent of state median income (SMI)) or that impact the Lead Agency's ability to contact the family or pay the child care providers (e.g., a family's change of address, a change in the parent's choice of child care provider).
Check and describe any additional reporting requirements required by the Lead Agency during the 12-month eligibility period. Check all that apply.
i. Additional changes that may impact a family's eligibility during the 12-month period.
Describe:
(1) Child care need has ended without another need; (2) no eligible child remains in the home; (3) the eligibility unit has not paid the required sliding fees to a child care provider; or (4) the eligibility unit has an active claim, and has not entered into a repayment agreement, or the eligibility unit is not making payments on an agreement plan. Upon notification of the non-temporary change, eligibility would end at the end of the service month.
ii. Changes that impact the Lead Agency's ability to contact the family. Describe:
iii. Changes that impact the Lead Agency's ability to pay child care providers. Describe:

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c. Any additional reporting requirements that the Lead Agency chooses to require from parents during the minimum 12-month eligibility period, shall not require an additional office visit. In addition, the Lead Agency must offer a range of notification options to accommodate families. How does the Lead Agency allow families to report changes to ensure that reporting requirements are not burdensome and to avoid an impact on continued eligibility between redeterminations? Check all that apply.

☑ i. Phone
☑ ii. Email
☑ iii. Online forms
iv. Extended submission hours
v. Postal Mail
☑ vi. FAX
✓ vii. In-person submission
viii. Other.
Describe:

d) Families must have the option to voluntarily report changes on an ongoing basis during the minimum 12-month eligibility period. Lead Agencies are required to act on information reported by the family if it will reduce the family's co-payment or increase the family's subsidy. Lead Agencies are prohibited from acting on information reported by the family that would reduce the family's subsidy unless the information reported indicates that the family's income exceeds 85 percent of SMI after considering irregular fluctuations in income or, at the option of the Lead Agency, the family has experienced a non-temporary change in eligible activity.

i. Describe any other changes that the Lead Agency allows families to report.
Families are allowed to report any change to the TANF agency on their case because the Missouri eligibility system is integrated. Changes that decrease benefits are not

acted on in the system. If a change is reported that increases benefits, the system will

update and give the family an updated determination.

ii. Provide the citation for this policy or procedure.

According to the Child Care Manual 2030.005.00 CHANGES NOT REQUIRED TO BE REPORTED BY ELIGIBILITY UNIT, "[a]n eligibility unit may report changes that are not required to be reported or changes may become known to the agency [Department of Social Services] by other means. The [DSS FSD] eligibility specialist

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will disregard all known changes that are not required to be reported unless the benefit will be increased or until the eligibility unit reapplies for Child Care Subsidy. Even though a change will not affect a Child Care Subsidy case, [the DSS FSD eligibility specialist will] record all information in the system when received."

3.4.4 Prevent the disruption of employment, education, or job training activities

3.4.4 Prevent the disruption of employment, education, or job training activities.

Lead Agencies are required to have procedures and policies in place to ensure that parents (especially parents receiving assistance under the TANF program) are not required to unduly disrupt their employment, education, or job training activities to comply with the Lead Agency's or designated local entity's requirements for the redetermination of eligibility for assistance (658E(c)(2)(N)(ii); 98.21(d)).

Examples include developing strategies to inform families and their providers of an upcoming redetermination and the information that will be required of the family, pre-populating subsidy renewal forms, having parents confirm that the information is accurate, and/or asking only for the information necessary to make an eligibility redetermination. In addition, states and territories can offer a variety of family-friendly methods for submitting documentation for eligibility redetermination that considers the range of needs for families in accessing support (e.g., use of languages other than English, access to transportation, accommodation of parents working non-traditional hours).

a) Identify, where applicable, the Lead Agency's procedures and policies to ensure that
parents (especially parents receiving TANF program funds) do not have their
employment, education, or job training unduly disrupted to comply with the
state/territory's or designated local entity's requirements for the redetermination of
eligibility. Check all that apply.
☑ i. Advance notice to parents of pending redetermination

☑ i. Advance notice to parents of pending redetermination
ii. Advance notice to providers of pending redetermination
☑ iii. Pre-populated subsidy renewal form
v. Online documentation submission
v. Cross-program redeterminations

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	vi. Extended office hours (evenings and/or weekends)
Г	vii. Consultation available via phone
V	viii. Other.
	Describe:
	Families are able to apply either electronically or by mailing in an application.
	Families that have completed the application in full without requiring additional

information, and families applying at re-determination, are not required to have an

4 Ensure Equal Access to Child Care for Low-Income Children

interview in order for their application to be processed.

A core purpose of CCDF is to promote parental choice and to empower working parents to make their own decisions regarding the child care services that best suit their family's needs. Parents have the option to choose from center-based care, family child care, or care provided in the child's own home. In supporting parental choice, the Lead Agencies must ensure that families receiving CCDF funding have the opportunity to choose from the full range of eligible child care settings and must provide families with equal access to child care that is comparable to that of non-CCDF families. Lead Agencies must employ strategies to increase the supply and to improve the quality of child care services, especially in underserved areas. In addition to generally building the supply of child care for all families, this effort also supports equal access for CCDF eligible children to the priced child care market.

This section addresses strategies that the Lead Agency uses to promote parental choice, ensure equal access, and increase the supply of child care. Note: In responding to questions in this section, the Office of Child Care (OCC) recognizes that each state/territory identifies and defines its own categories and types of care. The OCC does not expect states/territories to change their definitions to fit the CCDF-defined categories and types of care. For these questions, provide responses that closely match the CCDF categories of care.

Note: When asked for citations, responses can include state statute, regulations, administrative rules, policy manuals or policy issuances. See the Introduction on page 4 for more detail.

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4.1 Maximize Parental Choice and Implement Supply Building Mechanisms

The parent(s) of each eligible child who receive(s) or is offered financial assistance for child care services has the option of either receiving a child care certificate or, if available, enrolling their child with a provider that has a grant or contract for providing child care services (658E(c)(2)(A); 98.30(a)). Even if a parent chooses to enroll their child with a provider who has a grant or contract, the parent will select the provider, to the extent practicable. If a parent chooses to use a certificate, the Lead Agency shall provide information to the parent on the range of provider options, including care by sectarian providers and relatives. Lead Agencies must require providers chosen by families to meet health and safety standards and has the option to require higher standards of quality. Lead Agencies are reminded that any policies and procedures should not restrict parental access to any type of care or provider (e.g. center care, home care, in-home care, for-profit provider, non-profit provider, or faith-based provider, etc.) (98.15 (a)(5)).

4.1.1 Describe the child care certificate, including when it is issued to parents (before or
after the parent has selected a provider) and what information is included on the
certificate (98.16 (q)).

N/A

4.1.2 Identify how the parent is informed that the child care certificate allows the option to choose from a variety of child care categories, such as private, not-for-profit, faith-based providers; centers; FCC homes; or in-home providers (658E(c)(2)(A)(i); 658P(2); 658Q). Check all that apply.

a. Certificate provides information about the choice of providers
b. Certificate provides information about the quality of providers
c. Certificate is not linked to a specific provider, so parents can choose any provider
d. Consumer education materials on choosing child care

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e. Referrals provided to child care resource and referral agencies
f. Co-located resource and referral staff in eligibility offices
g. Verbal communication at the time of the application
h. Community outreach, workshops, or other in-person activities
i. Other.
Describe:

4.1.3 A core principle of CCDF is that families receiving CCDF-funded child care should have equal access to child care that is comparable to that of non-CCDF families (658E(c)(4)(A) and 98.45(a)).

a. Describe how parents have access to the full range of providers eligible to receive CCDF:

The Lead Agency contracts with CCAMO to provide a database of child care providers in Missouri showing criteria such as subsidy acceptance, capacity, types of care, accreditation status, environmental, hours of operation and scheduling needs (full time, part, time, and non-tradional hours) payment assistance, program affiliations (such as Heads Start), curriculum, transportation, services to support special needs, and more. The contract requires CCAMO to have available online and phone access for families to search for child care providers based on the needs of the family. CCAMO has a system of capacity building partners to assist individuals looking for information to become a licensed or subsidy registered child care provider to expand the availability of child care access.

b. Describe state data on the extent to which eligible child care providers participate in the CCDF system:

As of March 31, 2021, there are approximately 3,065 providers who are licensed or license-exempt in the state of Missouri. Of the 3,065, there were 1,622 licensed and 257 license-exempt subsidy providers, which means 61% of all licensed/license-exempt providers who are contracted to receive subsidy payments. Trends in data from October 2020 to March 2021 indicate the number of subsidy providers has been stable with around 1,620 licensed providers and 1,039 registered (license-exempt and family, friend, and neighbors) for an average of 2,659 subsidy providers. However, when comparing

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March 2021 data to data from March 2020, Missouri has seen a decrease of approximately 200 licensed and license-exempt providers and approximately 400 providers who accept child care subsidy payments. We believe this decrease may be attributed to the COVID-19 pandemic.

c. Identify any barriers to provider participation, including barriers related to payment rates and practices - including for family child care and in-home providers - based on provider feedback and reports to the Lead Agency:

Providers have reported that barriers to subsidy participation include: a lack of slots for infants and toddlers, the state subsidy rates are too low to sustain a program, the costs for enrolling and training new employees (background checks, CPR training, etc.) when the turnover rate for child care providers is high, and the rate of pay is not competitive enough when compared to other employment opportunities.

4.1.4 Certify by describing the Lead Agency's procedures for ensuring that parents have unlimited access to their children whenever their children are in the care of a provider who receives CCDF funds (658E(c)(2)(B); 98.16(t)).

State regulation 13 CSR 35-32.070(8)(B)7. establishes the following provision: "Child care provider shall ensure custodial parents and legal guardians have access to their child(ren)." In addition to state regulations, the CCDF provider agreements for licened providers state the following: "The provider shall allow custodial parents or legal guardians to have unlimited access to their children while the children are in care"; for unlicensed providers caring for six or fewer children "The provider shall provide parental access to the parent's child(ren), the provider, and records on the parent's child(ren) while their child(ren) are in care"; and for license-exempt providers "The provider shall provide parental access to the parent's child(ren), the provider, and records on the parent's child(ren) while their child(ren) are in care."

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4.1.5 The Lead Agency must allow for in-home care (i.e., care provided in the child's own home) but may limit its use (98.16(i)(2)). Will the Lead Agency limit the use of in-home care in any way?
Care in any way?
□ No.
Yes. If checked, what limits will the Lead Agency set on the use of in-home care? Check all that apply.
a. Restricted based on the minimum number of children in the care of the provider to meet the Fair Labor Standards Act (minimum wage) requirements. Describe:
b. Restricted based on the provider meeting a minimum age requirement. Describe:
c. Restricted based on the hours of care (i.e., certain number of hours, non-traditional work hours).Describe:
d. Restricted to care by relatives. (A relative provider must be at least 18 years of age based on the definition of eligible child care provider (98.2)). Describe:
Per Missouri statute 210.027, a provider must be at least 18 years of age.
e. Restricted to care for children with special needs or a medical condition.
Describe:
f. Restricted to in-home providers that meet additional health and safety requirements beyond those required by CCDF. Describe:
☑ g. Other.

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Describe:

Missouri does not issue licensure for providers who care for a child in the child's home. Individuals providing care in the child's home must be registered with the Lead Agency, are prohibited from caring for more than six children or more than three children under the age of two, and are only allowed to care for those children who reside in that home. See 210.211 and 210.201(2) RSMo.

4.1.6 Child care services available through grants or contracts.

a) In addition to offering certificates, does the Lead Agency provide child care services
through grants or contracts for child care slots (658A(b)(1))? Note: Do not check 'yes' if
every provider is simply required to sign an agreement to be paid in the certificate
program.
No. If no. skip to 4.1.7

No. If no, skip to 4.1.7.

Yes, in some jurisdictions but not statewide.

If yes, describe how many jurisdictions use grants or contracts for child care slots.

The Lead Agency offers two opportunities for contracted slots. The Lead Agency offers competitive bids for EHS contracts in eight areas of the state for a total of approximately 444 slots for young children. The Lead Agency also provides contracts through community partnerships for Before and After School programs in the St. Louis and Kansas City regions of the state for a total of approximately 8,800 slots.

Yes, statewide. I	f yes,	describe:
-------------------	--------	-----------

- i. How the Lead Agency ensures that parents who enroll with a provider who has a grant or contract have choices when selecting a provider:
- ii. The entities that receive contracts (e.g., shared services alliances, CCR&R agencies, FCC networks, community-based agencies, child care providers) and how grants or contracts are promoted by the Lead Agency:
- iii. How rates for contracted slots are set through grants and contracts and if they are viewed by providers as a vehicle for stabilizing payments.

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4.1.6 Child care services available through grants or contracts. b) Will the Lead Agency use grants or contracts for child care services to increase the supply and/or quality of specific types of care? □ No Yes. If yes, does the Lead Agency use grants or contracts to increase the supply and/or quality of child care programs serving the populations below? Check all that apply. i. Grants or Contracts are used in Child Care Programs that serve Children with disabilities: To increase the supply of care To increase the quality of care ii. Grants or Contracts are used in Child Care Programs that serve Infants and toddlers: To increase the supply of care ▼ To increase the quality of care iii. Grants or Contracts are used in Child Care Programs that serve School-age children: To increase the supply of care ▼ To increase the quality of care iv. Grants or Contracts are used in Child Care Programs that serve Children needing non-traditional hour care: To increase the supply of care

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v. Grants or Contracts are used in Child Care Programs that serve Children

To increase the quality of care

To increase the supply of care

To increase the quality of care

experiencing homelessness:

vi. Grants or Contracts are used in Child Care Programs that serve Children with diverse linguistic or cultural backgrounds:
To increase the supply of care
To increase the quality of care
vii. Grants or Contracts are used in Child Care Programs that serve Children in underserved areas:
☐ To increase the supply of care
To increase the quality of care
viii. Grants or Contracts are used in Child Care Programs that serve Children in urban areas:
☐ To increase the supply of care
To increase the quality of care
ix. Grants or Contracts are used in Child Care Programs that serve Children in rural areas:
☐ To increase the supply of care
To increase the quality of care
x. Grants or Contracts are used in Child Care Programs that serve Other populations, please specify :
☐ To increase the supply of care
☐ To increase the quality of care
Describe

4.1.7 Lead Agencies must identify shortages in the supply of high-quality child care providers that meet parents' needs and preferences. List the data sources used to identify any shortages and declines in the supply of care types that meet parents' needs. Also describe the method of tracking progress to support equal access and parental choice (98.16(x).

a. In child care centers.

The Lead Agency is working towards regular reviews of data collected by the state

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system compared with data collected by CCAMO in order to determine true shortage areas for child care centers and to provide targeted initiatives in the highest shortages areas. The Lead Agency will track progress towards increasing the number of available slots and access to professional development, and will implement quality initiatives in these areas. Data of parental need is collected by CCAMO through surveys of families looking for child care and following searches in the CCR&R system. CCAMO has a system of capacity building partners to monitor supply and demand throughout the state. In addition, CCAMO's capacity building partners are utilized to expand the accessibility of child care by educating potential providers on the opportunity to become a licensed or registered child care provider who accepts child care subsidy payments. CCAMO distributes marketing materials to families at events, DSS regional offices, through social media, and through agencies and businesses in communities across Missouri. Additionally, it utilizes connections and conversations with community and regional partners to build awareness and promote parent resources and education.

b. In child care homes.

The Lead Agency is working toward regular reviews of data collected by the state system compared with data collected by CCAMO in order to determine true shortage areas for family homes and to provide targeted initiatives in the highest shortages areas. The Lead Agency will track progress towards increasing the number of available slots and access to professional development, and will implement quality initiatives in these areas. Data of parental need is collected by CCAMO through surveys of families looking for child care and following searches in the CCR&R system. CCAMO has a system of capacity building partners to monitor supply and demand throughout the state. In addition, CCAMO's capacity building partners are utilized to expand the accessibility of child care by educating potential providers on the opportunity to become a licensed or registered child care provider who accepts child care subsidy payments. CCAMO distributes marketing materials to families at events, DSS regional offices, through social media, and through agencies and businesses in communities across Missouri. Additionally, it utilizes connections and conversations with community and regional partners to build awareness and promote parent resources and education.

c. Other.

N/A

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4.1.8 Lead Agencies are required to develop and implement strategies to increase the supply of and improve the quality of child care services (98.16 (x)). These strategies should address children in underserved areas; infants and toddlers; children with disabilities, as defined by the Lead Agency; and children who receive care during non-traditional hours. Identify what method(s) is (are) used to increase supply and/or to improve quality for the following populations and indicate in the description if a strategy is focused more on building supply or on improving quality.

- a) Children in underserved areas. Check and describe all that apply.
 - ☑ i. Grants and contracts (as discussed in 4.1.6).

Describe:

The Lead Agency contracts with MASN to provide School Age Community (SAC) grants to provide slots in communities with a high proportion of children eligible for the Free and Reduced Lunch (FRL) program. The SAC grants target underserved areas for the purpose of building supply and require applicants to meet school district income thresholds and describe community need.

- ii. Targeted Family Child Care Support such as Family Child Care Networks.

 Describe:
- iii. Start-up funding.

Describe:

Using COVID-19 relief funding, the Lead Agency is offering start-up funding for new child care providers. Priority will be given to applicants in currently underserved areas and in areas where there is no licensed or regulated care (e.g. child care deserts).

v. Technical assistance support.

Describe:

The Lead Agency has nine Educare providers throughout the state covering all 114 counties and the City of St. Louis. Educare specialists work with registered, license-exempt, and licensed child care providers who provide care to subsidy eligible

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children age birth to six years. Services are prioritized based on provider location and type of care offered to ensure that providers in underserved areas and in unlicensed care receive services. Educare provides onsite visits to the providers enrolled in the program. A Quality Improvement Plan, focusing on Health & Safety measures, is completed within 60 days of enrollment and is ongoing. The programs use a specified curriculum and resources during onsite visits. Educare may provide non-monetary items to promote the health and safety of the early childhood environment and/or assist with school readiness skills in under-served areas. Non-monetary items may include things like smoke detectors, baby gates, or books and toys that correlate with professional development topics and/or the curriculum focus during onsite visits. Educare services include support groups as well as trainings which are free of cost to the provider.

v. Recruitment of providers.

Describe:

CCAMO's referral center distributes information on child care start-up, including underserved areas of the state, and has an in-depth guide available for family child care start-up. CCAMO utilizes its capacity building partners around the state to host meetings for those interested in opening a family child care home business and is currently conducting a Family Child Care Network pilot to further support and stabilize family child care homes.

☐ vi.	Tiered	payment rates	(as in 4.3.3).
Des	scribe:		

✓ vii. Support for improving business practices, such as management training, paid sick leave, and shared services.

Describe:

Trainings are available on the Missouri Workshop Calendar for child care directors, and the Lead Agency encourages efforts to involve providers in underserved areas. CCAMO offers Show Me Business and Leadership Services that include, but are not limited to, business operations consultation services, leadership and personal development training, Show Me Child Care Resources (SMCCR) shared services platform with tools, forms, and discounts to assist with business management, HR,

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and financial management as well as access to TeleMed and mental health visits. SMCCR offers a discount to child care providers accepting and enrolling a high number of children on state subsidy.

viii. Accreditation supports.

Describe:

Child care providers serving subsidy eligible children receive a 20% incentive of the base rate per month. The Lead Agency will look at the possibility of providing supports for providers, especially those in underserved areas, to become accredited using COVID-19 relief funding.

ix. Child Care Health Consultation.

Describe:

The Lead Agency provides Child Care Health and Safety Consultation. This funding supports Local Public Health Agencies in providing consultation and/or education to child care providers on topics related to health issues in child care settings and health promotion activities to children in child care, including children in rural and other underserved areas of the state.

x. Mental I	Health Consultation
Describe:	
xi. Other.	
Describe:	

4.1.8 Lead Agencies are required to develop and implement strategies to increase the supply of and improve the quality of child care services (98.16 (x)). These strategies should address children in underserved areas; infants and toddlers; children with disabilities, as defined by the Lead Agency; and children who receive care during non-traditional hours. Identify what method(s) is (are) used to increase supply and/or to improve quality for the following populations and indicate in the description if a strategy is focused more on building supply or on improving quality.

b. Infants and toddlers. Check and describe all that apply.

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☑ i. Grants and contracts (as discussed in 4.1.6).

Describe:

The Early Head Start (EHS) model directly serves families under the 185% of the FPL. EHS services include: child care, parent education and support, age appropriate developmental screenings, comprehensive health and mental health services, including substance abuse counseling, home visits, supports to parents and guardians to fulfill parental roles as primary caregivers and educators, help to parents to move toward self-sufficiency by strengthening community supports, increasing quality and capacity of child care programs from families who are in school/training, receiving Temporary Assistance (TA), at risk of child abuse or neglect, or have an incapacitated parent. The program also coordinates programs providing services in accordance with Part C of the Individuals with Disabilities Education Act, provides parent education including parent-child development information, and provides ongoing support through case management, peer support groups, adult education and basic literacy skills, job training, job placement services, and assistance in obtaining support. The Lead Agency also supports EHS-Child Care Partnerships (EHS-CCP) to increase and improve linkages between EHS programs and child care subsidy. The goal is to assist EHS-CCP partners with financial resources that support the provisions of wrap around and comprehensive services offered by both programs.

ii. Family Child Care Networks.

Describe:

iii. Start-up funding.

Describe:

Using COVID-19 relief funding, the Lead Agency is offering start-up funding for new child care providers. Priority will be given to applicants who will provide infant/toddler care.

☑ iv. Technical assistance support.

Describe:

The Lead Agency is piloting an Infant/Toddler Specialist Network (ITSN) and currently has eight ITSN partnerships serving 56 counties in Missouri. ITSN

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improves the quality of care and education that infants and toddlers receive while away from the primary caregiver; increases the knowledge level and competencies of infant and toddler caregivers/teachers and directors; promotes community connections to increase awareness and use of available resources, and services that support healthy, safe, and nurturing care for infants and toddlers; and, implements an efficient, and accountable infant and toddler specialist system to increase its capacity to offer services. There are three levels of the ITSN program: Level 1 - Onsite Consultation - included in this level is: Infant and Toddler Environmental Resource Scale (ITERS-3), Quality Improvement Training and Referrals to the Program for Infant/Toddler Care (PITC) Cohort Training or for Targeted Trainings; Level 2 - PITC Cohort Training - included in this level is: Classroom Training, Mentoring, Coaching, Consultation, and Support; Level 3 -Targeted Trainings - included in this level is: Personal Care Routines, Infant and Toddler activities, Program Structure, Family Engagement and, Interactions between the caregiver and infant/toddler. Outcomes: Increase of the ITERS categories in the pre-to post-assessment; Increase in centers completing the activities defined in the Onsite Consultation Improvement Plan; Trainees participating in targeted trainings will show an increase in subject matter knowledge through pre-and post-test; and, Centers seeking services through ITSN in the future. The Lead Agency will continue to examine the feasibility of expanding the ITSN project statewide based on available funding and appropriation authority.

v. Recruitment of providers.
Describe:
vi. Tiered payment rates (as in 4.3.3). Describe:
Describe.
vii. Support for improving business practices, such as management training paid sick leave, and shared services.
Describe:
viii. Accreditation supports.

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Describe:
ix. Child Care Health Consultation. Describe:
 x. Mental Health Consultation. Describe: The Lead Agency is in the process of implementing and infant and early childhood mental health consultation program to begin a statewide consultation program. Using COVID-19 relief funding, the Lead Agency will be able to assist direct service providers to acquire infant and early childhood endorsements to better serve children.
xi. Other. Describe:
4.1.8 Lead Agencies are required to develop and implement strategies to increase the supply of and improve the quality of child care services (98.16 (x)). These strategies should address children in underserved areas; infants and toddlers; children with disabilities, as defined by the Lead Agency; and children who receive care during non-traditional hours. Identify what method(s) is (are) used to increase supply and/or to improve quality for the following populations and indicate in the description if a strategy focused more on building supply or on improving quality.
c. Children with disabilities. Check and describe all that apply. i. Grants and contracts (as discussed in 4.1.6). Describe:
ii. Family Child Care Networks. Describe:
☐ iii. Start-up funding. Describe:

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iv. Technical assistance support.

Describe:

The Lead Agency has nine Educare providers throughout the state covering all 114 counties and the City of St. Louis. Educare specialists work with registered, licenseexempt, and licensed child care providers who provide care to subsidy eligible children age birth to six years. Educare provides onsite visits to the providers enrolled in the program. Educare services include support groups as well as trainings, which are free of cost to the provider. Educare refers children with special needs, who attend a licensed child care facility, to inclusion specialists for resources and, if acceptable, a child assessment. The Lead Agency also contracts with United 4 Children to provide statewide child care inclusion services for licensed and licensed-exempt providers. The program has multiple levels of service for both families and child care providers. United 4 Children keeps a database of all licensed and regulated programs statewide. It also keeps records regarding which programs have successfully worked with varying levels of inclusion so that they can help guide families toward a program that will fit the needs of the family. The family is presented with a list of programs that have current availability so that they can make the final decision on what program will best meet the needs of the family. Inclusion specialists work with the program to prepare caregivers for any specialized training needed to successfully include the child in their program. If a child is having a difficult time in their current program, the provider or parent may contact the inclusion specialist for help. With parental consent, the inclusion specialist observes the child in the child care program and works with the child care provider to make necessary accommodations to successfully include the child in the program. The inclusion specialist provides resources to the family and discusses if further evaluation is recommended. Inclusion specialists provide training for child care providers statewide on early childhood inclusion, child development, challenging behavior, working and communicating with families, as well as more specific trainings focused on specific topics including Autism, Down syndrome, etc.

v. Recruitme	ent of providers
Describe:	

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vi. Tiered payment rates (as in 4.3.3).
Describe:
 vii. Support for improving business practices, such as management training, paid sick leave, and shared services. Describe: Child Care Aware of Missouri offers the online service Show Me Child Care Resources which provides access to trainings, services, materials for directors an owners to improve child care business practices, and programs for staff and children. Content sections are available with information on managing classrooms how to connect with families with young children, and child health and development. A discount is offered to child care providers accepting state subsidy
viii. Accreditation supports. Describe:
ix. Child Care Health Consultation. Describe:
x. Mental Health Consultation. Describe:
xi. Other. Describe:

4.1.8 Lead Agencies are required to develop and implement strategies to increase the supply of and improve the quality of child care services (98.16 (x)). These strategies should address children in underserved areas; infants and toddlers; children with disabilities, as defined by the Lead Agency; and children who receive care during non-traditional hours. Identify what method(s) is (are) used to increase supply and/or to improve quality for the following populations and indicate in the description if a strategy is focused more on building supply or on improving quality.

d. Children who receive care during non-traditional hours. Check and describe all that apply.

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Describe:
Using COVID-19 relief funding, the Lead Agency is providing a one-time funding opportunity for providers who provide care to children during non-traditional hours.
The Lead Agency considers non-traditional hours to be evenings, nights, and weekends.
ii. Family Child Care Networks.
Describe:
☐ iii. Start-up funding.
Describe:
▼ iv. Technical assistance support.
Describe:
The Lead Agency has nine Educare providers throughout the state covering all 114 counties and the City of St. Louis. Educare specialists work with registered, license-
exempt, and licensed child care providers who provide care to subsidy eligible children age birth to six years. Educare provides onsite visits to the providers
enrolled in the program. It is often difficult for providers serving non-traditional
hours to get to trainings; therefore, Educare specialists will go to the provider's
location for technical assistance as well as evening and weekend trainings to
ensure accessible times of the week. A Quality Improvement Plan, focusing on
Health & Safety measures, is completed within 60 days of enrollment and is
ongoing. The programs use a specified curriculum and resources during onsite
visits. Educare services include support groups as well as trainings that are free of cost to the provider.
v. Recruitment of providers.
Describe:
vi. Tiered payment rates (as in 4.3.3).
Describe:

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paid sick leave, and shared services. Describe:
viii. Accreditation supports. Describe:
ix. Child Care Health Consultation. Describe:
x. Mental Health Consultation. Describe:
xi. Other. Describe:

4.1.8 Lead Agencies are required to develop and implement strategies to increase the supply of and improve the quality of child care services (98.16 (x)). These strategies should address children in underserved areas; infants and toddlers; children with disabilities, as defined by the Lead Agency; and children who receive care during non-traditional hours. Identify what method(s) is (are) used to increase supply and/or to improve quality for the following populations and indicate in the description if a strategy is focused more on building supply or on improving quality.

e. Other. Check and describe all that apply.

☑ i. Grants and contracts (as discussed in 4.1.6).

Describe:

Using COVID-19 relief funding, the Lead Agency is providing funding opportunities for child care providers to expand existing programs or to make necessary upgrades to meet the health and safety needs of the children they serve. The Lead Agency is also reviewing the funding opportunities in the Elementary and Secondary School Emergency Relief American Rescue Plan (ESSER ARP) to support the Payroll Protection Program (described in the Missouri CRRSA Spend Plan) to address programs' past and future expenses.

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ii.	Family	Child Ca	are Netv	vorks.
De	escribe:			

☑ iii. Start-up funding.

Describe:

Using COVID-19 relief funding, the Lead Agency is providing funding opportunities for child care providers to start new child care programs, to increase the supply of infant/toddler, preschool, and school-age care across the state.

v. Technical assistance support.

Describe:

Programs that receive funding opportunities using COVID-19 relief funding will receive technical assistance in business administration in order for providers to sustain their business operations beyond the relief funding opportunity. Additionally, the Lead Agency contracts with MASN to provide technical assistance to SAC grantees. Technical assistance includes program level visits to participating after school programs on the operation of the program, onsite observation, and consultation on quality improvement.

v. Recruitment of providers.

Describe:

Using COVID-19 relief funding, the Lead Agency will be issuing grants to Higher Educational Institutions and DESE Career Centers to add Early Childhood Profession Programs to educate future child care providers who will provide their communities with quality child care and early education.

vi. Tiered payment rates (as in 4.3.3).	
Describe:	
☐ vii. Support for improving business practices, such as m	anagement training,
paid sick leave, and shared services.	
Describe:	

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viii. Accreditation support Describe:	S.
ix. Child Care Health Cor Describe:	sultation.
x. Mental Health Consulta Describe:	ation.
xi. Other. Describe:	

4.1.9 Lead Agencies must prioritize investments for increasing access to high-quality child care and development services for children of families in areas that have significant concentrations of poverty and unemployment and do not currently have sufficient numbers of such programs (658 E(c)(2)(M); 98.16 (x);98.46(b)).

a) How does the Lead Agency define areas with significant concentrations of poverty and unemployment?

Counties in which 20% or more of the population is living below 100% of the poverty level and unemployment is 7% or higher, are defined by the Lead Agency as areas with significant concentrations of poverty and unemployment.

b) Describe how the Lead Agency prioritizes increasing access to high-quality child care and development services for children of families in areas that have significant concentrations of poverty and unemployment and that do not have high-quality programs. The Lead Agency contracts with the Missouri Small Business Development Center (SBDC) to provide one-on-one counseling to child care business owners and directors to help support their finances. Additionally, online classes will be available to child care providers, directors, and owners on best practices. These services are free of charge and available across the entire state.

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4.2 Assess Market Rates and Analyze the Cost of Child Care

4.2 Assess Market Rates and Analyze the Cost of Child Care

Key principles of the CCDF are to: (1) provide equal access to childcare for children receiving childcare assistance; and (2) ensure parental choice by offering a full range of childcare services. Payment rates that are too low to support equal access undermine these principles. To establish subsidy payment rates that ensure equal access, Lead Agencies collect and analyze data through a number of tools. Lead Agencies have the option to conduct a statistically valid and reliable (1) market rate survey (MRS) reflecting variations in the price to parents of childcare services by geographic area, type of provider, and age of child or (2) an ACF pre-approved alternative methodology, such as a cost estimation model (CEM) (658E(c)(4)(B)). A cost estimation model estimates the cost of care by incorporating both data and assumptions to judge what expected costs would be incurred by childcare providers and parents under different scenarios. Another approach would be a cost study that collects cost data at the facility or program level to measure the costs (or inputs used) to deliver childcare services (CCDF-ACF-PI-2018-01).

Regardless of whether Lead Agencies conduct a MRS or an alternative methodology, they are required to analyze the cost of providing child services, known as the narrow cost analysis, that meet basic health/safety/quality and staffing requirements (base level care) (98.45(b)(3), (f)(1)(ii)(A), and (f)(2)(ii)), and higher-quality care at each level of quality, as defined by the Lead Agency <math>(98.45(b)(4), (f)(1)(ii)(B), and (f)(2)(iii)). The analysis must identify the gaps between the cost of care and subsidy levels adopted by the state and then be considered as part of the rate setting process.

Note: Any Lead Agency considering using an alternative methodology, instead of a MRS rate survey, is required to submit a description of its proposed approach to its ACF Regional Child Care Program Office for pre-approval in advance of the Plan submittal (see https://www.acf.hhs.gov/occ/resource/ccdf-acf-pi-2016-08

). Advance approval is not required if the Lead Agency plans to implement both a MRS and an alternative methodology.

A MRS or an ACF pre-approved alternative methodology must be developed and conducted no earlier than 2 years before the date of submission of the Plan (658E(c)(4)(B)(i) (98.45 (c)). Due to the COVID-19 pandemic, Lead Agencies may request a waiver for up to one additional year (until July 1, 2022) to complete the required MRS or an ACF pre-approved alternative

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methodology. Lead Agencies may also request the required Narrow Cost Analysis be waived for one year (until July 1, 2022). These waiver requests must include a justification linked to the COVID-19 pandemic.

4.2.1 Completion of the MRS or ACF pre-approved alternative methodology.

Did the state/territory conduct a statistically valid and reliable MRS or ACF pre-approved alternative methodology?
Yes. If yes, please identify the methodology(ies) used below to assess child care prices and/or costs.
☑ a. MRS.
When was your data gathered (provide a date range, for instance, September - December, 2019)?
The most recent market rate survey was conducted in FFY2018. The survey opened August 7, 2018 and closed on September 21, 2018. The Lead Agency is conducting a market rate survey during FFY22.
☐ b. ACF pre-approved alternative methodology.
Identify the date of the ACF approval and describe the methodology:
No, a waiver is being requested in Appendix A.
a. Please identify the Lead Agency's planned methodology(ies) to assess child care prices and/or costs.
☐ i. MRS.
If checked, describe the status of the Lead Agency's implementation of the MRS.
ii. ACF pre-approved alternative methodology.
If checked, describe the status of the Lead Agency's implementation of the ACF
pre-approved alternative methodology, including if applicable, the date of the ACF
approval and a description of the methodology:

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b. If a waiver is requested, Lead Agencies will need to respond to questions 4.2.2- 4.5.2 based on data collected for the FY 2019-2021 CCDF Plan or any data collected since then. Identify the date of the Lead Agencies' most recent and complete Market Rate Survey or ACF pre-approved alternative methodology that will provide data to inform responses to questions 4.2.2 - 4.5.2.

4.2.2 Prior to developing and conducting the MRS, or conducting the ACF pre-approved alternative methodology, the Lead Agency is required to consult with (1) the State Advisory Council or similar coordinating body, local child care program administrators, local child care resource and referral agencies, and other appropriate entities, and (2) organizations representing caregivers, teachers, and directors (98.45 (e)). Local child care program administrators may also be good informants to Lead Agencies on narrow cost analyses.

Describe how the Lead Agency consulted with the:

a) State Advisory Council or similar coordinating body:

The Lead Agency will provide a draft of the MRS to the Coordinating Board for Early Childhood, and board members will be given an opportunity to review and provide feedback to the Lead Agency.

b) Local child care program administrators:

The Lead Agency will send a notice of the upcoming MRS via invoice messaging and email to all child care providers.

c) Local child care resource and referral agencies:

The Lead Agency will consult with the statewide CCR&R prior to developing and conducting the MRS in order to gather their feedback.

d) Organizations representing caregivers, teachers, and directors:

The 2018 Market Rate Survey draft was reviewed by the MRS Advisory Group consisting of child care providers, representatives from Educare, representatives from the statewide CCR&R, and Lead Agency staff.

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e) Other. Describe:

N/A

4.2.3 ACF has established a set of benchmarks, largely based on research, to identify the components of a valid and reliable market rate survey (81 FR, p. 67509). To be considered valid and reliable a Market Rate Survey or preapproved alternative methodology meets the following:

- represents the child care market
- provides complete and current data
- uses rigorous data collection procedures
- reflects geographic variations
- analyzes data in a manner that captures other relevant differences

An MRS can use administrative data, such as child care resource and referral data, if it is representative of the market.

- a. Describe how each of the benchmarks are met in either the MRS or ACF pre-approved alternative methodology.
 - i. Represent the child care market: Click or tap here to enter text.

All licensed, license-exempt, and regulated child care providers are requested to take the survey. Each facility, whether receiving Child Care Subsidy or not, will be sent the MRS to complete. Based on comments provided during the local public hearings for this state plan, there was some confusion regarding what specifically is being asked about the true cost of care and how the data gathered in the MRS is used to inform rate structures. The Lead Agency will provide additional education on the MRS prior to conducting it to ensure the data collected in the next MRS is a valid representation of the true cost of care.

ii. Provide complete and current data:

If no response was provided by a particular child care provider, the state's contractor will follow up and assist the provider completing the survey.

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iii. Use rigorous data collection procedures:

Providers will have a designated time period to complete the survey (e.g., 4 weeks). The Lead Agency will use a respondent-friendly, user-tested questionnaire. If child care providers do not return a survey, then the state contractor's customer service representatives will contact the providers and offer them the opportunity to complete the survey over the phone. Three attempts will be made to contact non-responsive programs by telephone and personalized correspondence. Using a combination of distribution methods and detailed tracking of responses will allow the Lead Agency to identify populations with lower response rates.

iv. Reflect geographic variations:

All licensed, license-exempt, and regulated child care providers across the state will have the opportunity to complete the MRS. Any geographic influence in response rates will be accounted for during data analysis.

v. Analyze data in a manner that captures other relevant differences:

The collected data will be analyzed to identify outliers and/or incomplete responses and those will be removed from the sample.

b. Given the impact of COVID-19 on the child care market, do you think that the data you
gathered (as indicated in 4.2.1) on the prices or costs of child care adequately reflect the
child care market as you submit this plan?

\mathbf{Z}	No
П	Yes

If yes, why do you think the data represents the child care market?

Not applicable as the Lead Agency did not conduct a MRS during the pandemic since the data would not reflect the typical child care market rate.

4.2.4 Describe how the market rate survey or ACF pre-approved alternative methodology reflects variations in the price or cost of child care services by:

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a) Geographic area (e.g., statewide or local markets). Describe:

Surveys will be distributed statewide to licensed, license-exempt, and regulated providers. The Lead Agency will provide additional education on the MRS prior to conducting it so that responses across the state will reflect the true cost of care in each geographical area.

b) Type of provider. Describe:

Data will be reviewed based on type of care offered to determine the cost of care for licensed centers, license-exempt centers, licensed family child care homes and unlicensed family child care homes.

c) Age of child. Describe:

Per the most recent MRS, rates charged for care are differentiated by age groups for infants, preschool and school-age.

d. Describe any other key variations examined by the market rate survey or ACF preapproved alternative methodology, such as quality level.

The MRS will ask if the child care provider is accredited.

4.2.5 Has the Narrow Cost Analysis been completed for the FY 2022 - 2024 CCDF Plan
No, a waiver is being requested in Appendix A. If no, describe the status of the Lead Agency's upcoming narrow cost analysis.
Yes, the narrow cost analysis information is included in the report as described in 4.2.6. If yes, describe how the State/Territory analyzed the cost of child care through a narrow cost analysis for the FY 2022 - 2024 CCDF Plan, including:
a. The methodology the Lead Agency used to conduct, obtain, and analyze data of
the estimated cost of care (narrow cost analysis), including any relevant variation
by geographic location, category of provider, or age of child (98.45 (f)(ii)).

b. How the methodology addresses the cost of child care providers' implementation of health, safety, quality and staffing requirements (i.e. applicable licensing and regulatory requirements, health and safety standards, training and professional development standards, and appropriate child to staff ratio, groups size limits, and caregiver qualification requirements (98.45 (f)(ii)(A)).

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- c. How the methodology addresses the cost of higher-quality care, as defined by the Lead Agency using a quality rating and improvement system or other system of quality indicators, at each level of quality (98.45 (f)(ii)(B)).
- d. The gap between costs incurred by child care providers and the Lead Agency's payment rates based on findings from the narrow cost analysis.

4.2.6 After conducting the market rate survey or ACF pre-approved alternative methodology, the Lead Agency must prepare a detailed report containing the results of the MRS or ACF pre-approved alternative methodology. The detailed report must also include the Narrow Cost Analysis, as described in 4.2.5, which estimates the cost of care (including any relevant variation by geographic location, category of provider, or age of child) necessary to support (1) child care providersâ implementation of the health, safety, quality, and staffing requirements, and (2) higher quality care, as defined by the Lead Agency using a quality rating and improvement system or other system of quality indicators, at each level of quality. For states without a QRIS or for a state with a QRIS system that is currently limited to only certain providers, those states may use other quality indicators (e.g. provider status related to accreditation, PreK standards, Head Start performance standards, school-age quality standards, or state defined quality measures.)

The Lead Agency must make the report with these results widely available no later than 30 days after completion of the report, including posting the results on the Lead Agency website. The Lead Agency must describe in the detailed report how the Lead Agency took into consideration the views and comments of the public or stakeholders.

Describe how the Lead Agency made the results of the market rate survey or ACF preapproved alternative methodology report widely available to the public (98.45(f)(1)) by responding to the questions below.

a. Date the report containing results was made widely available - no later than 30 days after the completion of the report. 11/30/2018

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b. Describe how the Lead Agency made the detailed report containing results widely available and provide the link where the report is posted.

The Lead Agency announced the posting of the report via GovDelivery. A direct link to the report is available at: https://dss.mo.gov/re/pdf/oecmmr/2018-child-care-market-rate-survey.pdf .

c. Describe how the Lead Agency considered stakeholder views and comments in the detailed report.

Stakeholder views and comments were considered by the advisory group and the project management team at each phase of the state plan process. The Lead Agency incorporated views and comments, when possible, to the state plan revision when finalizing the plan.

4.3 Establish Adequate Payment Rates

The Lead Agency must set CCDF subsidy payment rates, in accordance with the results of the current MRS or ACF pre-approved alternative methodology, as identified in 4.2.1, at a level to ensure equal access for eligible families to child care services that are comparable with those provided to families not receiving CCDF assistance. Lead Agencies must also consider the costs of base and higher quality care at each level as part of its rate setting. The Lead Agency must re-evaluate its payment rates at least every 3 years.

4.3.1 Provide the base payment rates and percentiles (based on the most recent MRS as identified in 4.2.1) for the following categories below.

4.3.1 Provide the base payment rates and percentiles (based on the most recent MRS as identified in 4.2.1) for the following categories below.

Lead Agencies are required to provide a summary of data and facts in their Plan to demonstrate how its payment rates ensure equal access. The preamble to the final rule (81 FR, p. 67512), indicates that a benchmark for adequate payment rates is the 75th percentile of the most recent MRS. The 75th percentile is the number separating the lowest 75 percent of rates from the highest 25 percent. Setting rates at the 75th percentile, while not a requirement, would ensure

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that eligible children have access to three out of four child care slots.

The 75th percentile benchmark applies to the base rates. Base rates are the lowest, foundational rates before any differentials are added (e.g., for higher quality or other purposes). Further, base rates must be sufficient to ensure that minimum health and safety and staffing requirements are covered.

Percentiles are not required if the Lead Agency conducted an ACF pre-approved alternative methodology, but must be reported if the Lead Agency conducted a MRS. For states that conduct an ACF pre-approved alternative methodology, report the base payment rates based on a full-time weekly rate.

The ages and types of care listed below are meant to provide a snapshot of the categories on which rates can be based and are not intended to be comprehensive of all categories that might exist or to reflect the terms used by the Lead Agency for particular ages. If rates are not statewide, please use the most populous geographic region (defined as the area serving highest number of CCDF children) to report base payment rates below.

- a. Provide the base payment rates and percentiles based on either the statewide rates or the most populous area of the state (area serving highest number of children accessing CCDF). To facilitate compiling state by state payment rates, provide the full-time weekly base payment rates in the table below. If weekly payment rates are not published, then the Lead Agency will need to calculate its equivalent.
 - i. Age of child in what type of licensed child care setting (All rates are full-time) Infant (6 months) Center care:

Base payment rate:37.70

Full-time weekly base payment rate: 188.50

If the Lead Agency conducted an MRS, what is the percentile of the base payment rate? 58% of the 75th percentile rate

If the Lead Agency used an alternative methodology what percent of the estimated cost of care is the base rate? N/A

ii. Age of child in what type of licensed child care setting (All rates are full-time) - Toddler (18 months) Center care:

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Base payment rate:37.70

Full-time weekly base payment rate: 188.50

If the Lead Agency conducted an MRS, what is the percentile of the base payment rate? 58% of the 75th percentile rate

If the Lead Agency used an alternative methodology what percent of the estimated cost of care is the base rate? N/A

iii. Age of child in what type of licensed child care setting (All rates are full-time) - Preschooler (4 years) Center care:

Base payment rate:29.00

Full-time weekly base payment rate: 145.00

If the Lead Agency conducted an MRS, what is the percentile of the base payment rate? 58% of the 75th percentile rate

If the Lead Agency used an alternative methodology what percent of the estimated cost of care is the base rate? N/A

iv. Age of child in what type of licensed child care setting (All rates are full-time) - School-age child (6 years) Center care (Based on full-day, full-year rates that would be paid during the summer):

Base payment rate:23.20

Full-time weekly base payment rate: 116.00

If the Lead Agency conducted an MRS, what is the percentile of the base payment rate? 58% of the 75th percentile rate

If the Lead Agency used an alternative methodology what percent of the estimated cost of care is the base rate? N/A

v. Age of child in what type of licensed child care setting (All rates are full-time) - Infant (6 months) Family Child Care:

Base payment rate:20.30

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Full-time weekly base payment rate: 101.50

If the Lead Agency conducted an MRS, what is the percentile of the base payment rate? 58% of the 75th percentile rate

If the Lead Agency used an alternative methodology what percent of the estimated cost of care is the base rate? N/A

vi. Age of child in what type of licensed child care setting (All rates are full-time) - Toddler (18 months) Family Child Care:

Base payment rate:20.30

Full-time weekly base payment rate: 101.50

If the Lead Agency conducted an MRS, what is the percentile of the base payment rate? 58% of the 75th percentile rate

If the Lead Agency used an alternative methodology what percent of the estimated cost of care is the base rate? N/A

vii. Age of child in what type of licensed child care setting (All rates are full-time) - Preschooler (4 years) Family Child Care:

Base payment rate: 18.56

Full-time weekly base payment rate: 92.80

If the Lead Agency conducted an MRS, what is the percentile of the base payment rate? 58% of the 75th percentile rate

If the Lead Agency used an alternative methodology what percent of the estimated cost of care is the base rate? N/A

viii. Age of child in what type of licensed child care setting (All rates are full-time) - School-age child (6 years) Family Child Care (Based on full-day, full-year rates that would be paid during the summer):

Base payment rate:14.71

Full-time weekly base payment rate: 73.55

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If the Lead Agency conducted an MRS, what is the percentile of the base payment rate? 59% of the 75th percentile rate

If the Lead Agency used an alternative methodology what percent of the estimated cost of care is the base rate? N/A

b. If the Lead Agency does not publish weekly rates then how were these rates calculated (e.g., were daily rates multiplied by 5 or monthly rates divided by 4.3)? Daily rates multiplied by five.

c. Describe how the Lead Agency defines and calculates part-time and full-time care.

The current definitions are: Part-time care is 30 minutes to 2 hours 59 minutes in a calendar day. Half-time care is 3 hours to 4 hours 59 minutes. Full-time care is 5 hours to 12 hours in a calendar day. The Lead Agency is in the process of developing new definitions for care that will collapse the definitions of part-time and half-time care. Feedback from stakeholders, including overwhelming response from the child care provider community, validates that the current definitions are out of date and no longer represent current business practices. By collapsing these two categories, providers may benefit from a slight increase in subsidy reimbursement for those children authorized for part-time care. Families will also benefit by having additional hours authorized for their children to be in care, further supporting them in their work, training, and/or educational activities. The Lead Agency will submit an amended plan once the definitions are updated.

- d. Provide the date these current payment rates became effective (i.e., date of last update based on most recent MRS as reported in 4.2.1). 08/01/2019
- e. If applicable, identify the most populous area of the state (area serving highest number of children accessing CCDF) used to complete the responses above.
- St. Louis, Missouri
- f. Provide the citation, or link, if available, to the payment rates https://apps.dss.mo.gov/childcarerates/
- g. If the payment rates are not set by the Lead Agency for the entire state/territory, describe how many jurisdictions set their own payment rates (98.16(i)(3)).

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N/A

4.3.2

Describe how and on what factors the Lead Agency differentiates payment rates. Check all that apply.

a. Geographic area.

Describe:

Rates are based on several types of geographical regions and the market rate in those regions.

b. Type of provider.

Describe:

Licensed and license-exempt child care providers are paid the highest rates.

Licensed rates are further broken down by center, group home, and family home.

Providers not required to become licensed are paid at the lowest rates.

c. Age of child.

Describe:

The Lead Agency is in the process of revising the definitions of "infant" to "any child under 12 months of age," and "toddler" to "any child 12 to 24 months of age" in order to align the definitions with child care licensing rules. As the Lead Agency transitions to one office, which houses both child care licensing and child care subsidy, it is important that definitions for these categories are one and the same. In addition, for the purposes of child care subsidy, the Lead Agency is in the process of revising the definition of school-age to include "any child age seven years of age or older" in order to align with Missouri statute (§167.031, RSMo) that requires a child be enrolled in a public, private, parochial, home school, or combination of such schools by age seven. As the Lead Agency moves forward with conducting a Market Rate Survey in 2022, there will be questions included to determine if the cost for these categories of care are different. Upon analysis, if there is a need to recommend a change in how the child care rate structure is organized, then the Lead Agency will make the appropriate recommendations, including requests for any increases in provider rates. The Lead Agency believes making this revision is more responsive to the needs of providers as they pursue quality improvements for infant and toddler care as well as parents who are in search of appropriate child care settings for their infants and/or toddlers.

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d. Quality level.
Describe:
If the provider is accredited, they receive an incentive payment of 20% of the base
rate.
e. Other.
Describe:

4.3.3 Lead Agencies can choose to establish tiered rates, differential rates, or add-ons on top of their base rates as a way to increase payment rates for targeted needs (i.e., a higher rate for special needs children as both an incentive for providers to serve children with special needs and as a way to cover the higher costs to the provider to provide care for special needs children). Lead Agencies may pay providers more than their private pay rates as an incentive or to cover costs for higher quality care (81 FR, p. 67514).

Has the Lead Agency chosen to implement tiered reimbursement or differential rates?

No.
Yes. If yes, identify below any tiered or differential rates, and at a minimum,
indicate the process and basis used for determining the tiered rates, including if the
rates were based on the MRS or an ACF pre-approved alternative methodology.
Check and describe all that apply.

a. This option should not be selected if the answer above is "Yes" -- Tiered or differential rates are not implemented.

Describe:

■ b. Differential rate for non-traditional hours.

Describe:

The Lead Agency has a 15% rate differential for evening and weekend care. Non-traditional care is considered as care beginning or ending during the timeframe of 7:01 p.m. to 5:59 a.m. and Saturday 6 a.m. through Sunday 7 p.m. The rate differential is based on the MRS and is subject to appropriation. Using COVID-19 relief funding, the

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Lead Agency is planning to provide one-time funding to providers who provide care to children during non-traditional hours.

c. Differential rate for children with special needs, as defined by the state/territory.

Describe:

The Lead Agency has a 25% rate differential for special needs children. The rate differential is based on the MRS and is subject to appropriation.

d. Differential rate for infants and toddlers. Note: Do not check if the Lead Agency has a different base rate for infants/toddlers with no separate bonus or addon.

Describe:

e. Differential rate for school-age programs. Note: Do not check if the Lead Agency has a different base rate for school-age children with no separate bonus or add-on.

Describe:

☑ f. Differential rate for higher quality, as defined by the state/territory.

Describe:

The Lead Agency has a 20% rate differential for programs accredited by state recognized accrediting bodies. The rate differential is based on the MRS and is subject to appropriation.

g. Other differential rates or tiered rates.

Describe:

The Lead Agency has a 30% rate differential for programs providing care to 50% or more subsidy eligible children in the total enrollment. This rate differential has not been offered to new programs after 2003. Any providers that originally received the 30% rate differential were grandfathered in and several programs still receive it. In 2016, a new 30% rate differential was introduced for programs providing care to 50% or more subsidy eligible children in the total enrollment and were accredited or working towards accreditation with a state recognized accrediting body. The rate differential is based on the MRS and subject to appropriation.

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4.3.4 Establishment of adequate payment rates.

a. Describe how base payment rates are adequate and enable providers to meet health, safety, quality, and staffing requirements under CCDF, and how they were established based on the most recent MRS or ACF pre-approved alternative methodology and the Narrow Cost Analysis, as reported in 4.2.1 and 4.2.5.. In determining compliance with the Act for the equal access provisions in the FY2019-2021 CCDF Plan, the OCC reviewed all the states with payment rates below the 75th percentile benchmark. Of those states, the half with the lowest payment rates were considered non-compliant and placed on a corrective action plan (CAP). These states all had rates below the 25th percentile for either some or all categories of care. The 25th percentile is not to be viewed as a benchmark or a long-term solution to gauge equal access. It is also not to be viewed as sufficient for compliance in future plan cycles. OCC expects to continue to take action against states with the lowest rates in future plan cycles in an effort to keep payment rates moving upward toward ensuring equal access. Note: Per the preamble (81 FR p. 67512), in instances where an MRS or ACF pre-approved alternative methodology indicates that prices or costs have increased, Lead Agencies must raise their rates as a result.

Payment rates combined with incentives offered for weekend and evening care, accreditation, disproportionate share for serving 50% or more eligible subsidy children, and an incentive for serving special needs children results in a higher payment for providers. The Lead Agency was able to increase base rates for full time licensed care from an average of 47.5% to 58% of the 75th percentile rate, based on the 2018 MRS. Any full time licensed rates that exceeded 58% of the 75th percentile rate were not changed. The Lead Agency's goal is to continue to increase rates, based on analyses of future MRS results, until the 75th percentile is reached.

b) Describe how payment rates are adequate and have been established based on the **most recent MRS or alternative methodology**. Note: Per the preamble (81 FR 67512), in instances where a MRS or alternative methodology indicates that prices or costs have increased, Lead Agencies must raise their rates as a result.

A market rate survey will be conducted in 2022 to determine the new cost of care with

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new guidelines and staffing costs. The market rate survey will include additional questions to help a child care provider explain the true cost of care to help determine where the rates compare with the previous market rate survey. The Lead Agency will review and analyze the results, and once completed, rate changes will be implemented to continue to move toward the 75th percentile, with available funding and appropriation authority.

4.3.5 Describe how the Lead Agency took the cost of higher quality, as determined in 4.2.5, into account, including how payment rates for higher-quality care, as defined by the Lead Agency using a QRIS or other system of quality indicators, relate to the estimated cost of care at each level of quality. Note: For states without a QRIS, the states may use other quality indicators (e.g. provider status related to accreditation, PreK standards, Head Start performance standards, or state-defined quality measures).

N/A

4.3.6 Identify and describe any additional facts that the Lead Agency considered in determining its payment rates ensure equal access. If applicable, provide a description of how any additional health and safety costs, because of the COVID-19 pandemic are included in rate setting.

N/A

4.4 Implement Generally Accepted Payment Practices and Ensure Timeliness of Payments

4.4 Implement Generally Accepted Payment Practices and Ensure Timeliness of Payments

Lead Agencies are required to demonstrate that they have established payment practices

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applicable to all CCDF child care providers that include ensuring the timeliness of payments by either (1) paying prospectively prior to the delivery of services or (2) paying within no more than 21 calendar days of the receipt of a complete invoice for services. To the extent practicable, the Lead Agency must also support the fixed costs of providing child care services by delinking provider payments from a child's occasional absences by (1) paying based on a child's enrollment rather than attendance, (2) providing full payment if a child attends at least 85 percent of the authorized time, (3) providing full payment if a child is absent for 5 or fewer days in a month, or (4) using an alternative approach for which the Lead Agency provides a justification in its Plan (658E(c)(2)(S)(ii); 98.45(l)(2)).

Lead Agencies are required to use CCDF payment practices that reflect generally accepted payment practices of child care providers who serve children who do not receive CCDF-funded assistance. Unless a Lead Agency is able to demonstrate that the following policies are not generally accepted in its particular state, territory, or service area or among particular categories or types of providers, Lead Agencies must (1) pay providers based on established part-time or full-time rates rather than paying for hours of service or smaller increments of time and (2) pay for reasonable, mandatory registration fees that the provider charges to private-paying parents (658E(c)(2)(S); 98.45(l)(3)). Responses may also identify any additional health and safety fees providers are charging as a result of COVID-19.

In addition, there are certain other generally accepted payment practices that are required. Lead Agencies are required to ensure that child care providers receive payment for any services in accordance with a payment agreement or an authorization for services, ensure that child care providers receive prompt notice of changes to a family's eligibility status that could impact payment, and establish timely appeal and resolution processes for any payment inaccuracies and disputes (98.45(I)(4) through (6); 658E(c)(2)(S)(ii); 98.45(I)(4); 98.45(I)(5); 98.45(I)(6)).

4.4.1 Certify by identifying and describing the payment practices below that the Lead Agency has implemented for all CCDF child care providers.

a. Ensure the timeliness of payments by either (Lead Agency to implement at least one
of the following):
i. Paying prospectively prior to the delivery of services.
Describe the policy or procedure.

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☑ ii. Paying within no more than 21 calendar days of the receipt of a complete invoice for services.

Describe the policy or procedure.

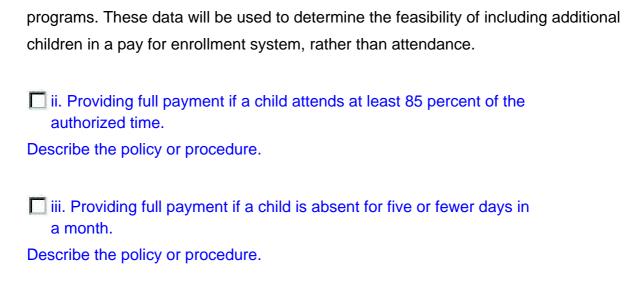
Child care providers are required to invoice within 60 days of the service month. The payment is automatically generated within five to seven business days from the date attendance is entered into the payment system.

b. To the extent practicable, support the fixed costs of providing child care services by delinking provider payments from a child's occasional absences by: (Note: The Lead Agency is to choose at least one of the following):

☑ i. Paying based on a child's enrollment rather than attendance. Describe the policy or procedure.

The Lead Agency is conducting two activities to pilot a system that pays for enrollment rather than attendance. (1) Using COVID-19 relief funding, the Lead Agency will pilot a program for approximately 8,000 foster children to ensure providers can immediately accept children in foster care when asked. Using data regarding children in foster care by geographical area, the Lead Agency will determine the number of foster children, on average, across the state, and the number of child care providers needed to adequately serve foster children in their area of the state. The Lead Agency will determine a reasonable period of time (e.g., 90 days) that the provider would need to fill a vacant slot or risk losing it. (2) The Lead Agency will pilot a payment system for infants and toddlers and children with special needs who are enrolled in the Child Care Subsidy program. This pilot will provide payment for enrollment, defined as the total amount of units a child has been authorized to attend. The payment system for both of these pilots will include a rigorous monitoring component that examines a prescribed number of records to ensure payments are made in accordance with CCDF policies and reduces the incidence of improper billings on the part of providers. Monitoring of this payment system includes the number of days and type of attendance (e.g. half-time, part-time, full-time) that a child was in attendance in order for the provider to receive payment for the entire enrollment. The Lead Agency is investigating how similar states use this approach to inform its policy and will monitor the effectives of the payment changes in meeting the program goals. The Lead Agency will routinely collect quantitative and qualitative information (e.g., payment data, provider feedback) to conduct an evaluation of the outcomes from these two pilot

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iv. Use an alternative approach for which the Lead Agency provides a justification in its Plan.

If chosen, please describe the policy or procedure and the Lead Agency's justification for this approach.

Currently, child care providers may bill for up to five absences and/or holidays per month, for children authorized 20 or more units of care per month. Child care providers may bill for up to three absences and/or holidays for children authorized for 3-19 units of care per month. A child must be in care at least one unit during a service month for child care providers to claim absences and/or holidays. Absences are defined as a child facility being open for business and with a child being absent when they would normally be in care. Holidays are defined as any date the facility is closed for business on a day they would normally be open. Child care providers may bill up to 11 holidays in a state fiscal year.

- c. The Lead Agency's payment practices reflect generally accepted payment practices of child care providers who serve children who do not receive CCDF subsidies. These payment practices must include the following two practices unless the Lead Agency provides evidence that such practices are not generally accepted in its state (658E(c)(2)(S); 98.45(I)(3)).
 - i. Paying on a part-time or full-time basis (rather than paying for hours of service or smaller increments of time).

Describe the policy or procedure and include a definition of the time increments (e.g., part time, full-time).

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Currently, child care payment is based on units of care for specific number of hours in a unit (e.g., full-time is 5 hours to 12 hours, half-time is 3 hours to 4 hours 59 minutes, part-time is 30 minutes to 2 hours 59 minutes.) The Lead Agency is looking at the feasibility of extending part-time to include a child who is in attendance for any amount of time up to 2 hours 59 minutes.

ii. Paying for reasonable mandatory registration fees that the provider charges to private-paying parents.

Describe the policy or procedure.

The Lead Agency does not pay registration fees.

d. The Lead Agency ensures that providers are paid in accordance with a written payment agreement or an authorization for services that includes, at a minimum, information regarding provider payment policies, including rates, schedules, any fees charged to providers, including fees related to COVID 19, and the dispute-resolution process. Describe:

Payments are paid in accordance with payment agreements.

e. The Lead Agency provides prompt notice to providers regarding any changes to the family's eligibility status that could impact payments, and such a notice is sent no later than the day that the Lead Agency becomes aware that such a change will occur. Describe:

The Lead Agency notifies the child care provider of changes to the family's eligibility that could impact payments in two ways: (1) the state's child care eligibility system FAMIS generates a daily data batch Monday through Friday of updated family records and the state staff print the records and mail the notifications to providers; and (2) providers are notified of changes via a message in Child Care Business Information System (CCBIS). Also in CCBIS, the provider is able to view the family's information that changed.

f. The Lead Agency has a timely appeal and resolution process for payment inaccuracies and disputes. Describe:

Child care providers must report payment discrepancies within 60 days of the service month and submit a Child Care Provider Payment Resolution Request Form to the Lead Agency. Payment resolution requests are reviewed by the Lead Agency's Child Care

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Payment Unit within 30 calendar days of receipt and the average time to review and issue correction payments is five to seven business days.

g. Other. Describe: N/A

4.4.2 Do payment practices vary across regions, counties, and/or geographic areas?

✓ No, the practices do not vary across areas.
Yes, the practices vary across areas.
Describe:

4.4.3 Describe how Lead Agencies' payment practices described in subsection 4.4 support equal access to a full range of providers.

The Lead Agency offers rate differentials to providers who serve more than 50% children who receive child care subsidy, have special needs children, have homeless children, and/or have an accredited facility. These rates incentivize providers to enroll children who receive child care subsidy. Parents may choose from licensed, licensed-exempt, or providers not required to be licensed, each of which offers different rate levels.

4.5 Establish Affordable Co-Payments

Family co-payments are addressed in Section 3 related to minimum 12-month eligibility and the graduated phase-out provision and also in this subsection, because they are an important element for determining equal access. If a Lead Agency allows providers to charge amounts more than the required family co-payments, the Lead Agency must provide a rationale for this practice, including how charging such additional amounts will not negatively impact a family's ability to receive care they might otherwise receive, taking into consideration a family's co-payment and the provider's payment rate.

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	If the Lead Agency ensure that the family contribution/co-payment, based on a ale, is affordable and is not a barrier to families receiving CCDF services (98.16 all that apply
	a. Limit the maximum co-payment per family. Describe: .
(o. Limit the combined amount of co-payment for all children to a percentage of family income. List the percentage of the co-payment limit and The highest average percentage of family income that is paid for a co-pay is 4%
р	er child.
t	c. Minimize the abrupt termination of assistance before a family can afford the full cost of care ('the cliff effect') as part of the graduated phase-out of assistance discussed in 3.2.5.
ir	Once a family enters into Transitional Level A child care, the co-payment does not necrease but remains at the same level as the maximum co- payment in the raditional level of child care.
	d. Other. Describe:
does the	upport parental choice and equal access to the full range of child care options, ne Lead Agency choose the option to allow providers to charge families additional its above the required co-payment in instances where the provider's price exceeds osidy payment (98.45(b)(5))?
	Yes. If yes:
	Provide the rationale for the Lead Agency's policy to allow providers to charge
	amilies additional amounts above the required co-payment, including a
	lemonstration of how the policy promotes affordability and access for families.
	The Lead Agency allows child care providers to charge income-eligible families an
	idditional amount above the required sliding fee as long as the total amount
С	collected (e.g., the reimbursement rate paid by the Lead Agency plus the sliding fee

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plus any additional amount) does not exceed the provider's normal rate for non-CCDF families. The Lead Agency recognizes that child care providers are small business owners and, as such, are entitled to set their rates accordingly. The subsidy reimbursement is not intended to cover the entire rate as set by the provider, but should be set at a level that is affordable to eligible families. Additionally, by allowing providers to charge an additional amount above the sliding fee, families have the opportunity to access higher quality, and a wider variety, of care. Note: the Lead Agency is examining this issue through the collection and analysis of data that will inform child care providers how to better ensure affordability of child care to subsidy eligible families.

ii. Provide data (including data on the size and frequency of such amounts) on the extent to which CCDF providers charge additional amounts to families.

The Lead Agency does not currently collect data that indicates which providers charge additional amounts above the required sliding fee and how often additional amounts are charged; however, a question about additional amounts charged to families will be included in the next Market Rate Survey in 2022.

iii. Describe the Lead Agency's analysis of the interaction between the additional amounts charged to families with the required family co-payment, and the ability of current subsidy payment rates to provide access to care without additional fees.

The Lead Agency does not currently collect data to support an analysis of the interaction between the additional amounts charged to families with the required family co-payment and the ability of current subsidy payment rates to provide access to care with additional fees. The Lead Agency has secured a contract for a full Market Rate Survey in 2022 and subsequent rate analysis to obtain the necessary data and ensure the agency is promoting affordability and access for families.

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5 Establish Standards and Monitoring Processes to Ensure the Health and Safety of Child Care Settings

Lead Agencies are required to certify that there are in effect licensing requirements applicable to all child care services in the state/territory, which supports the health and safety of all children in child care. States and territories may allow licensing exemptions. Lead Agencies must describe how such licensing exemptions do not endanger the health, safety, and development of CCDF children in license-exempt care (98.16 (u)).

Lead Agencies also must certify that there are in effect health and safety standards and training requirements applicable to providers serving CCDF children whether they are licensed or license-exempt. These health and safety requirements must be appropriate to the provider setting and age of the children served, must include specific topics and training on those topics, and are subject to monitoring and enforcement procedures.

The organization of this section begins with a description of the licensing system for all child care providers in a state or territory and then moves to focus specifically on CCDF providers who may be licensed, or those exempt from licensing. The next section addresses child-staff ratios, group size limits, and required qualifications for caregivers, teachers, and directors (98.16(m)) serving CCDF children. The section then covers the health and safety requirements; standards, training, and monitoring and enforcement procedures to ensure that CCDF child care providers comply with licensing and health and safety requirements (98.16(n)). Finally, Lead Agencies are asked to describe any exemptions for relative providers (98.16(l)). In some cases, CCDF health and safety requirements may be integrated within the licensing system for licensed providers and may be separate for CCDF providers who are license-exempt. In either case, Lead Agencies are expected to identify and describe health and safety requirements for all providers receiving CCDF.

Note: When responding to questions in this section, the OCC recognizes that each state/territory identifies and defines its own categories of care. The OCC does not expect states/territories to change their definitions to fit the CCDF-defined categories of care. For these questions, provide responses that closely match the CCDF categories of care.

Criminal background check requirements are included in this section (98.16(o)). It is important

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to note that these requirements apply to all child care staff members who are licensed, regulated, or registered under state/territory law and all other providers eligible to deliver CCDF services.

Note: When asked for citations, responses can include state statute, regulations, administrative rules, policy manuals or policy issuances. See the Introduction on page 4 for more detail.

5.1 Licensing Requirements

Each state/territory must certify it has in effect licensing requirements applicable to all child care services provided within the state/territory (not restricted to providers receiving CCDF funds) and provide a detailed description of these requirements and how the requirements are effectively enforced (658E(c)(2)(F)). If any types of providers are exempt from licensing requirements, the state/territory must describe those exemptions and describe how these exemptions do not endanger the health, safety, or development of children. The descriptions must also include any exemptions based on provider category, type, or setting; length of day; and providers not subject to licensing because the number of children served falls below a Lead Agency-defined threshold and any other exemption to licensing requirements (658E(c)(2)(F); 98.16(u); 98.40(a)(2)(iv)).

5.1.1 To certify, describe the licensing requirements applicable to child care services provided within the state/territory by identifying the providers in your state/territory that are subject to licensing using the CCDF categories listed below? Check, identify, and describe all that apply, and provide a citation to the licensing rule.

a. Center-based child care.

i. Identify the providers subject to licensing:

In Missouri, unless an individual qualifies for a statutory exemption from licensure, an entity or individual who is caring for more than six children excluding children who live in the provider's home and who are eligible for enrollment in public school, or more than three children under the age of two, is required to obtain a child care license. A center is defined in regulation as child care program conducted in a location other than the provider's permanent residence, or separate from the provider's living quarters, where care is provided for children for any part of the 24-hour day.

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ii. Describe the licensing requirements:

Licensing requirements for group child care homes and child care centers include compliance with rules in regard to: physical requirements; fire safety; disaster and emergency preparedness; furniture, equipment, and materials; personnel; staff/child ratios; medical examination reports; admission policies and procedures; nighttime care; hourly care; overlap care; emergency school closings; child care program; health care; nutrition and food service; transportation and field trips; records and reports; and variance requests.

iii. Provide the citation:

19 CSR 30-62.010 - 19 CSR 30-62.230 which can be found at: https://www.sos.mo.gov/cmsimages/adrules/csr/current/19csr/19c30-62.pdf.

☑ b. Family child care. Describe and provide the citation:

i. Identify the providers subject to licensing:

In Missouri, unless an individual qualifies for a statutory exemption from licensure, an individual who is caring more than six children, excluding children who live in the provider's home and who are eligible for enrollment in public school, or more than three children under the age of two, is required to obtain a child care license. Missouri statute (§ 210.211, RSMo) A family child care home is defined as a child care program where care is given by a person licensed as a child care home provider for no more than 10 children for any part of the 24-hour day.

ii. Describe the licensing requirements:

Licensing requirements for family child care homes include compliance with rules in regard to: physical requirements; fire safety; disaster and emergency preparedness; furniture, equipment, and materials; personnel; family household members; medical examinations; admission policies and procedures; nighttime care; overlap care; emergency school closings; child care program; health care; nutrition and food service; transportation and field trips; records and reports; and variance requests.

iii. Provide the citation:

19 CSR 30-61.010 - 19 CSR 30-61.220 which can be found at: https://www.sos.mo.gov/cmsimages/adrules/csr/current/19csr/19c30-61.pdf.

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c. In-home care (care in the childas own) (if applicable):
i. Identify the providers subject to licensing:
ii. Describe the licensing requirements:
iii. Provide the citation:

5.1.2 Identify the CCDF-eligible providers who are exempt from licensing requirements. Describe exemptions based on length of day, threshold on the number of children in care, ages of children in care, or any other factors applicable to the exemption. Describe how such exemptions do not endanger the health, safety, and development of children (658E (c)(2)(F); 98.40(a)(2)). Do not include exempt relative care providers, this information will be collected in Section 5.6.

- a. License-exempt center-based child care. Describe and provide the citation by answering the questions below.
 - i. Identify the CCDF-eligible center-based child care providers who are exempt from licensing requirements. Describe the exemptions based on length of day, threshold on the number of children in care, ages of children in care, or any other factors applicable to the exemption:

The following center-based child care providers are exempt from being licensed: child care programs operated by a religious organization, summer camps, and schools.

- ii. Provide the citation to this policy:
- iii. Describe how the exemptions for these CCDF-eligible providers do not endanger the health, safety, and development of children.

Child care programs that are operated by a religious organization and nursery schools are regulated by the Lead Agency for fire and safety, health and sanitation standards per Missouri statute (§210.252, RSMo), and comprehensive background screenings are conducted on all child care staff members. For the remaining programs, comprehensive background checks are conducted on the provider, and child care staff

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members per Missouri statute (§ 210.1080, RSMo) at:

https://revisor.mo.gov/main/OneSection.aspx?section=210.1080&bid=48800&hl=.

These providers receive an onsite, unannounced monitoring visit that is conducted at the location of care before initial registration approval, and annually thereafter, to ensure the provider is compliant with applicable fire and safety, health, and sanitation standards.

- b. License-exempt family child care. Describe and provide the citation by answering the questions below.
 - i. Identify the CCDF-eligible family child care providers who are exempt from licensing requirements. Describe the exemptions based on length of day, threshold on the number of children in care, ages of children in care, or any other factors applicable to the exemption:

Any person who is caring for six or fewer children, including a maximum of three children under the age of two years, at the same physical address. Children who live in the caregiver's home and who are eligible for enrollment in public kindergarten, elementary, or high school shall not be considered in the total number of children being cared for.

- ii. Provide the citation to this policy:
- iii. Describe how the exemptions for these CCDF-eligible providers do not endanger the health, safety, and development of children.

Comprehensive background checks are completed on provider with household members (age 18 and older and under age 18 if certified as an adult in the commission of an offense) and child care staff members per Missouri statute (§ 210.1080, RSMo) at:

https://revisor.mo.gov/main/OneSection.aspx?section=210.1080&bid=48800&hl=. An onsite unannounced monitoring visit is conducted at the location of care before initial registration approval, and annually thereafter, to ensure the provider is compliant with health and safety standards.

c. In-home care (care in the child's own home by a non-relative): Describe and provide

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the citation by answering the questions below.

i. Identify the CCDF-eligible in-home child care (care in the child's own home by a non-relative) providers who are exempt from licensing requirements. Describe the exemptions based on length of day, threshold on the number of children in care, ages of children in care, or any other factors applicable to the exemption.

When care is provided in the child's home, the provider can only care for the children who reside in that home, and the total number of children may not exceed six, including a maximum of three children under the age of two years. Missouri statute (§ 210.211, RSMo) which can be found at:

https://revisor.mo.gov/main/OneSection.aspx?section=210.211&bid=48796&hl=.

ii. Provide the citation to this policy:

13 CSR 35-32.070 which can be found at:

https://www.sos.mo.gov/cmsimages/adrules/csr/current/13csr/13c35-32.pdf.

iii. Describe how the exemptions for these CCDF-eligible providers do not endanger the health, safety, and development of children.

Comprehensive background checks are completed on the provider per Missouri statute (§ 210.1080, RSMo) at:

https://revisor.mo.gov/main/OneSection.aspx?section=210.1080&bid=48800&hl=. An onsite unannounced monitoring visit is conducted at the location of care before initial registration approval, and annually thereafter, to ensure the provider is compliant with health and safety standards.

5.2 Standards for Ratios, Group Size and Qualifications for CCDF Providers

Lead Agencies are required to have child care standards for providers receiving CCDF funds, appropriate to the type of child care setting involved, that address appropriate ratios between the number of children and number of providers in terms of the age of the children, group size limits for specific age populations, and the required qualifications for providers (658E(c)(2)(H); 98.41(d); 98.16(m)). For ease of responding, this section is organized by CCDF categories of care, licensing status, and age categories. Respondents should map their Lead Agency categories of care to the CCDF categories. Exemptions for relative providers will be addressed in subsection 5.6.

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5.2.1 Describe how the state/territory defines the following age classifications. For instance, Infant: 0-18 months.

a. Infant. Describe:

An infant is any child under 12 months of age.

b. Toddler. Describe:

A toddler is any child 12 to 24 months of age.

c. Preschool. Describe:

A preschool child is any child two through five years of age who is not in kindergarten.

d. School-Age. Describe:

A school-age child is a child five years of age or older who is in kindergarten or above.

5.2.2 To demonstrate continued compliance, provide the ratio and group size for settings and age groups below.

a) Licensed CCDF center-based care

i. Infant

A. Ratio:

One adult to every four children

B. Group size:

No more than eight children in a group

ii. Toddler

A. Ratio:

One adult to every four children

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B. Group size:

No more than eight children in a group

iii. Preschool

A. Ratio:

The ratio for groups composed solely two-year-olds is one adult to every eight children. Groups composed solely of three and four-year-olds is one adult to every 10 children. Mixed groups of two-year-olds and up is one adult to every 10 children with a maximum of four two-year-olds in a group. If there are more than four two-year-olds in the mixed age group, then the ratio is one adult to every eight children.

B. Group size:

If the group is composed solely of two-year-old children, the maximum group size is 16 children.

iv. School-age

A. Ratio:

1 adult to every 16 children

B. Group size:

No group size requirements

v. Mixed-Age Groups (if applicable)

A. Ratio:

The ratio for mixed age groups of two years and up is one adult to every 10 children with a maximum of four two-year-olds in the group. If there are more than four two-year-olds in the mixed age group, the ratio is one adult to every eight children.

B. Group size:

No group size requirements

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vi. If any of the responses above are different for exempt child care centers, describe the ratio and group size requirements for license-exempt providers.

N/A

5.2.2 To demonstrate continued compliance, provide the ratio and group size for settings and age groups below.

b. Licensed CCDF family child care home providers:

i. Mixed Groups

A. Ratio:

The ratio is one adult to 7 to 10 children with a maximum of two children under age two years; one adult to five to six children with a maximum of three children under age two years; two adults to 7 to 10 children with a maximum of four children under age two years.

B. Group size:

10 children

ii. Infant

A. Ratio:

The ratio is one adult to four children and two adults to eight children.

B. Group size:

Four children with one adult and eight children with two adults

iii. Toddler

A. Ratio:

One adult to four children and two adults to eight children

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В.	Gr	้อน	aı	SI	ize:

Four children with one adult and eight children with two adults

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A. Ratio:

1 adult to 10 children

B. Group size:

10 children

v. School-age

A. Ratio:

1 adult to 10 children

B. Group size:

10 children

vi. If any of the responses above are different for exempt child care homes, describe the ratio and group size requirements for license-exempt family child care home providers.

N/A

5.2.2 To demonstrate continued compliance, provide the ratio and group size for settings and age groups below.

- c. Licensed in-home care (care in the child's own home):
- i. Mixed Groups (if applicable)

A. Ratio:

N/A

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B. Group size: N/A
ii. Infant (if applicable) A. Ratio: N/A
B. Group size: N/A
iii. Toddler (if applicable) A. Ratio: N/A
B. Group size: N/A
iv. Preschool (if applicable) A. Ratio: N/A
B. Group size: N/A
v. School-age (if applicable) A. Ratio: N/A
B. Group size: N/A

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vi. Describe the ratio and group size requirements for license-exempt in-home care. N/A

5.2.3 Provide the teacher/caregiver qualifications for each category of care.

a. Licensed Center-Based Care

i. Describe the teacher qualifications for licensed CCDF center-based care, including any variations based on the ages of children in care:

Providers/caregivers must be at least 18 years of age; have a qualifying comprehensive background screening on file; complete a minimum of 12 clock hours of child-related training each calendar year; and if the facility is licensed to care for children under 12 months, all caregivers must have documentation that they have successfully completed Lead Agency-approved safe sleep training.

ii. Describe the director qualification for licensed CCDF center-based care, including any variations based on the ages of children in care or the number of staff employed:

The qualifications for a director are based on the capacity of the facility as follows:

<u>Up to 20 Children</u> - 30 college semester hours, with 6 of the 30 hours in child-related courses; or 12 months' experience with six college semester hours in child-related courses; or a Child Development Associate (CDA) credential

- <u>21 60 Children</u> 60 college semester hours. 12 of the hours must be in child-related courses; or 24 months' experience and 12 college semester hours in child-related courses.
- <u>61 99 Children</u> 90 college semester hours. 18 of the 90 hours must be in child-related courses; or 36 months' experience and 18 college semester hours in child-related courses.

100 or more Children - 120 college semester hours. 24 of the 120 hours must be in child-related courses. 6 of the 24 college semester hours may include courses in business or management; or 4 years' experience and 24 college semester hours in child related courses. 6 of the 24 college semester hours may include courses in business or management.

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iii. If any of the responses above are different for license-exempt child care centers, describe which requirements apply to exempt centers:

There are no specific director qualifications for license-exempt providers.

iv. If applicable, provide the website link detailing the center-based teacher and director qualifications.

https://health.mo.gov/safety/childcare/director.php

b. Licensed Family Child Care

i. Describe the provider qualifications for licensed family child care homes, including any variations based on the ages of children in care:

Providers/caregivers must be at least 18 years of age; have a qualifying comprehensive background screening on file; complete a minimum of 12 clock hours of child-related training each calendar year; and if the family home is licensed to care for children under 12 months, the provider and all caregivers must have documentation that they have successfully completed department-approved safe sleep training.

ii. If any of the responses above are different for license-exempt family child care homes, describe which requirements apply to exempt homes:

Family child care providers who are exempt from licensure must be at least 18 years of age; have a qualifying comprehensive background screening on file; complete a minimum of six clock hours of child-related training each calendar year.

iii. If applicable, provide the website link detailing the family child care home provider qualifications:

Family child care provider rules can be found at:

https://s1.sos.mo.gov/cmsimages/adrules/csr/current/19csr/19c30-61.pdf.

c. Regulated or registered In-home Care (care in the child's own home by a non-relative)

i. Describe the qualifications for licensed in-home child care providers (care in the child's own home) including any variations based on the ages of children in care:

N/A. Missouri does not license providers who care for children in the child's home.

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ii. If any of the responses above are different for license-exempt in-home care providers, describe which requirements apply to exempt in-home care providers: In-home CCDF providers are individuals selected by the family to provide child care within the child's home. The provider must be registered with the Lead Agency and may only provide care for six or fewer children, including a maximum of three children under the age of two years, at the same physical address.

5.3 Health and Safety Standards and Training for CCDF Providers

5.3 Health and Safety Standards and Training for CCDF Providers

The state/territory must describe its requirements for pre-service or orientation training and ongoing training. Lead Agencies are required to have minimum pre-service or orientation training requirements (to be completed within 3 months), as appropriate to the provider setting and the age of children served. This training must address the required health and safety topics (658E(c)(2)(I)(i)) and the content area of child development. Lead Agencies have flexibility in determining the number of training hours to require, and they may consult with Caring for our Children Basics for best practices and the recommended time needed to address these training requirements.

Lead Agencies must also have ongoing training requirements for caregivers, teachers, and directors who are caring for children receiving CCDF funds (658E(c)(2)(I)(i); 98.44(b)(1)(iii)). Lead Agencies are to report the total number of ongoing training hours that are required each year, but they do not have to report these hours out by topic (658E(c)(2)(G)(iii). Ongoing training requirements will be addressed in 5.3.13.

Both preservice/orientation and ongoing trainings should be a part of a broader systematic approach and progression of professional development (as described in section 6) within a state/territory.

States and territories must have health and safety standards

for programs (e.g., child care centers, family child care homes, etc.) serving children receiving CCDF assistance relating to the required health and safety topics as appropriate to the provider

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setting and age of the children served (98.41(a)). This requirement is applicable to all child care programs receiving CCDF funds regardless of licensing status (i.e., licensed or license-exempt). The only exception to this requirement is for relative providers, as defined in 98.2. Lead Agencies have the option of exempting relatives from some or all CCDF health and safety requirements (98.42(c)). Exemptions for relative providers' standards and training requirements will be addressed in question 5.6.3.

To certify, describe the following health and safety requirements for programs serving children receiving CCDF assistance on the following topics (98.16(I)) identified in questions 5.3.1 - 5.3.12. Note: Monitoring and enforcement will be addressed in subsection 5.4.

5.3.1 Prevention and control of infectious diseases (including immunizations) health and safety standards and training requirements.

a. Standard(s)

i. Provide a brief description of the standard(s). This description should identify the practices which must be implemented by child care programs.

The Lead Agency rules include reporting requirements for communicable diseases; require staff and children to have medical examinations, immunization requirements for children, restrictions for children and staff to be present when ill, and diapering and handwashing requirements. All requirements are designed to promote wellness and prevent and control infectious diseases.

ii. Describe any variations in the standard(s) by category of care (i.e. Center, FCC, Inhome), licensing status (i.e. licensed, license-exempt), and the age of the children in care.

The Lead Agency requirements are consistent in licensed and license-exempt programs. Additional sanitation requirements are in place related to care for infants and toddlers due to the fact that they are not fully immunized until 18 months of age.

iii. The Lead Agency must certify that the identified health and safety standard(s) is(are) in effect and enforced through monitoring. Provide the citation(s) for the standard(s), including citations for both licensed and license-exempt providers.

13 CSR 35-32.070, 19 CSR 30-60.060, 19 CSR 30-61.185 and 19 CSR 30-62.192

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- b. Pre-Service and Ongoing Training
 - i. Provide the citation(s) for these training requirements, including citations for both licensed and license-exempt providers.
 - 13 CSR 35-32.070 and 13 CSR 35-32.090. License-exempt provider requirements are in the agreements to participate in the subsidy program.
 - ii. Describe any variations in training requirements for the standard(s). Do training requirements vary by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), or the age of the children in care?

 All child care providers receiving CCDF funding are required to complete CCDF

iii. To demonstrate compliance, certify by checking below how the state/territory requires this training topic be completed by providers during either pre-service or during an orientation period within three (3) months of hire.

Health and Safety Training at least one time, regardless of licensure status.

during an onentation period within three (3) months of file.
✓ Pre-Service
Orientation within three (3) months of hire
iv. Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?
✓ Yes
□ No

v. How do providers receive updated information and/or training regarding the standard(s)? This description should include methods to ensure that providers are able to maintain and update the health and safety practices as described in the standards above.

The Lead Agency sends information to providers through email via the state's Gov Delivery system and the electronic time and attendance system (CCBIS). In addition, the training requirements are updated on the Lead Agency's website as needed.

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5.3.2 Prevention of sudden infant death syndrome and the use of safe-sleep practices.

a. Standard(s)

i. Provide a brief description of the standard(s). This description should identify the practices which must be implemented by child care programs.

The Lead Agency's licensing rules require facilities to have approved safe-sleep policies and provide parents with a copy. Safe-sleep rules promote safe-sleep practices in licensed facilities with requirements for safe sleep environments, as well as training requirements for caregivers. Topics include appropriate sleeping areas (cribs, pack and play), bedding, sleep wear, items in cribs, and sleeping on back.

ii. Describe any variations in the standard(s) by category of care (i.e. Center, FCC, Inhome), licensing status (i.e. licensed, license-exempt), and the age of the children in care.

Licensed child care providers must complete safe sleep training. Basic health and safety training must include safe sleep practices in child care.

iii. The Lead Agency must certify that the identified health and safety standard(s) is(are) in effect and enforced through monitoring. Provide the citation(s) for the standard(s), including citations for both licensed and license-exempt providers. Missouri statute (§ 210.223, RSMo); 19 CSR 30-61.135(1) and (2); and 19 CSR 30-62.132(1) and (2).

b. Pre-Service and Ongoing Training

- i. Provide the citation(s) for these training requirements, including citations for both licensed and license-exempt providers.
- 19 CSR 30-62.132license-exempt provider requirements are in the agreements to participate in the subsidy program.
- ii. Describe any variations in training requirements for the standard(s). Do training requirements vary by category of care (i.e. Center, FCC, In-home), licensing status

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(i.e. licensed, license-exempt), or the age of the children in care?

There is one variation in the Lead Agency's required training for child care providers. The CCDF Health and Safety Training provides an introduction on safe sleep practices for unlicensed child care providers; however, licensed child care providers who care for infants are required to complete a comprehensive training on safe sleep practices per Missouri statute (§ 210.223, RSMo). Citation: https://revisor.mo.gov/main/OneSection.aspx?section=210.223.

iii. To demonstrate compliance, certify by checking below how the state/territory requires this training topic be completed by providers during either pre-service or during an orientation period within three (3) months of hire.
Pre-Service
Orientation within three (3) months of hire
iv. Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?
Yes
No
v. How do providers receive updated information and/or training regarding the

standard(s)? This description should include methods to ensure that providers are able to maintain and update the health and safety practices as described in the standards above.

The Lead Agency sends information to providers through email via the state's Gov Delivery system and the electronic time and attendance system (CCBIS). In addition, the training requirements are updated on the Lead Agency's website as needed.

5.3.3 Administration of medication, consistent with standards for parental consent.

a. Standard(s)

i. Provide a brief description of the standard(s). This description should identify the practices which must be implemented by child care programs.

Medication must be in original packaging, labeled with child's name, and instructions

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for administration. Written parental permission must be on the file prior to administration of medication and the facility must document its administration. Medication is required to be stored out of reach of children or in a locked container.

ii. Describe any variations in the standard(s) by category of care (i.e. Center, FCC, Inhome), licensing status (i.e. licensed, license-exempt), and the age of the children in care.

There are no variations.

iii. The Lead Agency must certify that the identified health and safety standard(s) is(are) in effect and enforced through monitoring. Provide the citation(s) for the standard(s), including citations for both licensed and license-exempt providers.

19 CSR 30-61.185(3), and 19 CSR 30-62.192(3). License-exempt provider requirements are in the agreements to participate in the subsidy program.

- b. Pre-Service and Ongoing Training
 - i. Provide the citation(s) for these training requirements, including citations for both licensed and license-exempt providers.
 - 13 CSR 35-32.070 and 13 CSR 35-32.090
 - ii. Describe any variations in training requirements for the standard(s). Do training requirements vary by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), or the age of the children in care?

 There are no variations.
 - iii. To demonstrate compliance, certify by checking below how the state/territory requires this training topic be completed by providers during either pre-service or during an orientation period within three (3) months of hire.
 - ☑ Pre-Service☑ Orientation within three (3) months of hire
 - iv. Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?

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V	Yes
П	No

v. How do providers receive updated information and/or training regarding the standard(s)? This description should include methods to ensure that providers are able to maintain and update the health and safety practices as described in the standards above.

The Lead Agency sends information to providers through email via the state's Gov Delivery system and the electronic time and attendance system (CCBIS). In addition, the standards are updated on the Lead Agency's website as needed.

5.3.4 Prevention of and response to emergencies due to food and allergic reactions.

a. Standard(s)

i. Provide a brief description of the standard(s). This description should identify the practices which must be implemented by child care programs.

The Lead Agency's rules require programs to obtain medical information related to children, which would include food and allergic reactions. Rules require caregivers to respond to emergencies promptly and intelligently.

ii. Describe any variations in the standard(s) by category of care (i.e. Center, FCC, Inhome), licensing status (i.e. licensed, license-exempt), and the age of the children in care.

There are no variations.

iii. The Lead Agency must certify that the identified health and safety standard(s) is(are) in effect and enforced through monitoring. Provide the citation(s) for the standard(s), including citations for both licensed and license-exempt providers.

This standard is monitored for compliance during the onsite visit.

b. Pre-Service and Ongoing Training

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i. Provide the citation(s) for these training requirements, including citations for both licensed and license-exempt providers.

13 CSR 35-32.070 and 13 CSR 35-32.090

ii. Describe any variations in training requirements for the standard(s). Do training requirements vary by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), or the age of the children in care?

There are no variations.

iii. To demonstrate compliance, certify by checking below how the state/territory requires this training topic be completed by providers during either pre-service or
during an orientation period within three (3) months of hire.
✓ Pre-Service
Orientation within three (3) months of hire
iv. Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?
✓ Yes
□ No

v. How do providers receive updated information and/or training regarding the standard(s)? This description should include methods to ensure that providers are able to maintain and update the health and safety practices as described in the standards above.

The Lead Agency sends information to providers through email via the state's Gov Delivery system and the electronic time and attendance system (CCBIS). In addition, the standards are updated on the Lead Agency's website as needed.

5.3.5 Building and physical premises safety, including the identification of and protection from hazards, bodies of water, and vehicular traffic.

a. Standard(s)

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i. Provide a brief description of the standard(s). This description should identify the practices which must be implemented by child care programs.

The Lead Agency's licensing and license-exempt rules promote a safe child care premises through physical standards related to indoor and outdoor space and equipment, including requirements for outlet covers, and fences to prevent access to hazards such as bodies of water and vehicular traffic.

ii. Describe any variations in the standard(s) by category of care (i.e. Center, FCC, Inhome), licensing status (i.e. licensed, license-exempt), and the age of the children in care.

There are no variations.

iii. The Lead Agency must certify that the identified health and safety standard(s) is(are) in effect and enforced through monitoring. Provide the citation(s) for the standard(s), including citations for both licensed and license-exempt providers.

19 CSR 30-60.100, 19 CSR 30-61.085 and 19 CSR 30-62.082.

- b. Pre-Service and Ongoing Training
 - i. Provide the citation(s) for these training requirements, including citations for both licensed and license-exempt providers.
 - 13 CSR 35-32.070 and 13 CSR 35-32.090
 - ii. Describe any variations in training requirements for the standard(s). Do training requirements vary by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), or the age of the children in care?

 There are no variations.

iii. To demonstrate compliance, certify by checking below how the state/territory requires this training topic be completed by providers during either pre-service or during an orientation period within three (3) months of hire.

▼ Pre-Service	
Orientation within three (3) months of hire	

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iv. Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?
✓ Yes
No
v. How do providers receive updated information and/or training regarding the

v. How do providers receive updated information and/or training regarding the standard(s)? This description should include methods to ensure that providers are able to maintain and update the health and safety practices as described in the standards above.

The Lead Agency sends information to providers through email via the state's Gov Delivery system and the electronic time and attendance system (CCBIS). In addition, the standards are updated on the Lead Agency's website as needed.

5.3.6 Prevention of shaken baby syndrome, abusive head trauma, and child maltreatment.

a. Standard(s)

i. Provide a brief description of the standard(s). This description should identify the practices which must be implemented by child care programs.

The Lead Agency's rules require a policy and procedure to identify and prevent shaken baby syndrome and abusive head trauma and be aware of common physical and emotional signs and symptoms of child maltreatment.

ii. Describe any variations in the standard(s) by category of care (i.e. Center, FCC, Inhome), licensing status (i.e. licensed, license-exempt), and the age of the children in care.

There are no variations.

iii. The Lead Agency must certify that the identified health and safety standard(s) is (are) in effect. Provide the citation(s) for the standard(s), including citations for both licensed and license-exempt providers.

19 CSR 30-61.105(1)(I), 19 CSR 30-61.105(1)(J); 19 CSR 30-62.102(1)(I) and 19 CSR 30-62.102(1)(J)

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b. Pre-Service and Ongoing Training

□ No

- i. Provide the citation(s) for these training requirements, including citations for both licensed and license-exempt providers.
- 13 CSR 35-32.070 and 13 CSR 35-32.090
- ii. Describe any variations in training requirements for the standard(s). Do training requirements vary by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), or the age of the children in care?

 There are no variations.
- iii. To demonstrate compliance, certify by checking below how the state/territory requires this training topic be completed by providers during either pre-service or during an orientation period within three (3) months of hire.
 ✓ Pre-Service
 ✓ Orientation within three (3) months of hire
 iv. Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?
 ✓ Yes
- v. How do providers receive updated information and/or training regarding the standard(s)? This description should include methods to ensure that providers are able to maintain and update the health and safety practices as described in the standards above.

The Lead Agency sends information to providers through email via the state's Gov Delivery system and the electronic time and attendance system (CCBIS). In addition, the standards are updated on the Lead Agency's website as needed.

5.3.7 Emergency preparedness and response planning for emergencies resulting from a natural disaster or a human-caused event (such as violence at a child care facility), within the meaning of those terms under section 602(a)(1) of the Robert T. Stafford

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Disaster Relief and Emergency Assistance Act (42 U.S.C. 5195a(a)(1)). Emergency preparedness and response planning (at the child care provider level) must also include procedures for evacuation; relocation; shelter-in-place and lockdown; staff and volunteer training and practice drills; communications and reunification with families; continuity of operations; and accommodations for infants and toddlers, children with disabilities, and children with chronic medical conditions.

a. Standard(s)

i. Provide a brief description of the standard(s). This description should identify the practices which must be implemented by child care programs.

The Lead Agency's rules require homes/facilities to develop, implement, and maintain policies and procedures for responding to a disaster emergency, including having a written plan for medical and non-medical emergencies, evacuating children from the facility, lock-down procedures, and evacuation from a vehicle used to transport children. The plans must take into account the age and physical and mental abilities of children, the types of services offered, the types of disasters or emergencies likely to affect the area, and the need for ongoing communication and data sharing with other agencies.

ii. Describe any variations in the standard(s) by category of care (i.e. Center, FCC, Inhome), licensing status (i.e. licensed, license-exempt), and the age of the children in care.

There are no variations.

iii. The Lead Agency must certify that the identified health and safety standard(s) is(are) in effect and enforced through monitoring. Provide the citation(s) for the standard(s), including citations for both licensed and license-exempt providers.

19 CSR 30-60.080, 19 CSR 30-61.086, 19 CSR 30-62.87

b. Pre-Service and Ongoing Training

i. Provide the citation(s) for these training requirements, including citations for both licensed and license-exempt providers.

13 CSR 35-32.070 and 13 CSR 35-32.090

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ii. Describe any variations in training requirements for the standard(s). Do training requirements vary by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), or the age of the children in care?

There are no variations.

iii. To demonstrate compliance, certify by checking below how the state/territory
requires this training topic be completed by providers during either pre-service or
during an orientation period within three (3) months of hire.
✓ Pre-Service
Orientation within three (3) months of hire
iv. Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised
▼ Yes
□ No
. Here de manidade acceive un dete d'inferentieur en d'entreinie au condinc de

v. How do providers receive updated information and/or training regarding the standard(s)? This description should include methods to ensure that providers are able to maintain and update the health and safety practices as described in the standards above.

The Lead Agency sends information to providers through email via the state's Gov Delivery system and the electronic time and attendance system (CCBIS). In addition, the standards are updated on the Lead Agency's website as needed.

5.3.8 Handling and storage of hazardous materials and the appropriate disposal of biocontaminants.

a. Standard(s)

i. Provide a brief description of the standard(s). This description should identify the practices which must be implemented by child care programs.

The Lead Agency's rules require that hazardous items, including but not limited to flammable liquids, cleaning supplies, poisonous materials, hazardous personal care

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items, or other hazardous items be inaccessible to children.

ii. Describe any variations in the standard(s) by category of care (i.e. Center, FCC, Inhome), licensing status (i.e. licensed, license-exempt), and the age of the children in care.

There are no variations.

iii. The Lead Agency must certify that the identified health and safety standard(s) is(are) in effect and enforced through monitoring. Provide the citation(s) for the standard(s), including citations for both licensed and license-exempt providers. 19 CSR 30-60.100(1)(D), 19 CSR 30-61.085(1)(J), 19 CSR 30-62.082(1)(I)

- b. Pre-Service and Ongoing Training
 - i. Provide the citation(s) for these training requirements, including citations for both licensed and license-exempt providers.
 - 13 CSR 35-32.070 and 13 CSR 35-32.090
 - ii. Describe any variations in training requirements for the standard(s). Do training requirements vary by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), or the age of the children in care?

There are no variations

requires this training topic be completed by providers during either pre-service or during an orientation period within three (3) months of hire.
✓ Pre-Service
Orientation within three (3) months of hire
iv. Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?
▼ Yes
□ No
v. How do providers receive updated information and/or training regarding the

iii. To demonstrate compliance, certify by checking below how the state/territory

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standard(s)? This description should include methods to ensure that providers are

able to maintain and update the health and safety practices as described in the standards above.

The Lead Agency sends information to providers through email via the state's Gov Delivery system and the electronic time and attendance system (CCBIS). In addition, the standards are updated on the Lead Agency's website as needed.

5.3.9 Precautions in transporting children (if applicable).

a. Standard(s)

i. Provide a brief description of the standard(s). This description should identify the practices which must be implemented by child care programs.

The Lead Agency's rules require providers have a written transportation policy based on state laws and regulations that address the safe transport of children.

ii. Describe any variations in the standard(s) by category of care (i.e. Center, FCC, Inhome), licensing status (i.e. licensed, license-exempt), and the age of the children in care.

There are no variations.

iii. The Lead Agency must certify that the identified health and safety standard(s) is(are) in effect and enforced through monitoring. Provide the citation(s) for the standard(s), including citations for both licensed and license-exempt providers.

19 CSR 30-60.110, 19 CSR 30-61.200, 19 CSR 30-62.212

b. Pre-Service and Ongoing Training

i. Provide the citation(s) for these training requirements, including citations for both licensed and license-exempt providers.

13 CSR 35-32.070 and 13 CSR 35-32.090

ii. Describe any variations in training requirements for the standard(s). Do training requirements vary by category of care (i.e. Center, FCC, In-home), licensing status

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(i.e. licensed, license-exempt), or the age of the children in care?
There are no variations.
iii. To demonstrate compliance, certify by checking below how the state/territory requires this training topic be completed by providers during either pre-service or during an orientation period within three (3) months of hire.
✓ Pre-Service
✓ Orientation within three (3) months of hire
iv. Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?
✓ Yes
No
v. How do providers receive updated information and/or training regarding the standard(s)? This description should include methods to ensure that providers are

The Lead Agency sends information to providers through email via the state's Gov Delivery system and the electronic time and attendance system (CCBIS). In addition, the standards are updated on the Lead Agency's website as needed.

able to maintain and update the health and safety practices as described in the

5.3.10 Pediatric first aid and pediatric cardiopulmonary resuscitation (CPR).

a. Standard(s)

standards above.

i. Provide a brief description of the standard(s). This description should identify the practices which must be implemented by child care programs.

The Lead Agency's rules require staff to be qualified in pediatric first aid and CPR to mitigate the consequences of injury and/or emergency situation.

ii. Describe any variations in the standard(s) by category of care (i.e. Center, FCC, Inhome), licensing status (i.e. licensed, license-exempt), and the age of the children in care.

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There are no variations.

iii. The Lead Agency must certify that the identified health and safety standard(s) is(are) in effect and enforced through monitoring. Provide the citation(s) for the standard(s), including citations for both licensed and license-exempt providers.

13 CSR 35-32.070, 13 CSR 35-32.090, 19 CSR 30-61.105, 19 CSR 30-62.102

- b. Pre-Service and Ongoing Training
 - i. Provide the citation(s) for these training requirements, including citations for both licensed and license-exempt providers.
 - 13 CSR 35-32.070 and 13 CSR 35-32.090
 - ii. Describe any variations in training requirements for the standard(s). Do training requirements vary by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), or the age of the children in care?

 There are no variations.
 - requires this training topic be completed by providers during either pre-service or during an orientation period within three (3) months of hire.

 Pre-Service
 Orientation within three (3) months of hire

 iv. Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?

 Yes
 No

iii. To demonstrate compliance, certify by checking below how the state/territory

v. How do providers receive updated information and/or training regarding the standard(s)? This description should include methods to ensure that providers are able to maintain and update the health and safety practices as described in the standards above.

The Lead Agency sends information to providers through email via the state's Gov Delivery system and the electronic time and attendance system (CCBIS). In addition, the standards are updated on the Lead Agency's website as needed.

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5.3.11 Recognition and reporting of child abuse and neglect. Note: The description must include a certification that child care providers within the state comply with the child abuse reporting requirements of section 106(b)(2)(B)(i) of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5106a(b)(2)(B)(i)).

a. Standard(s)

i. Provide a brief description of the standard(s). This description should identify the practices which must be implemented by child care programs.

Child care providers are required to be knowledgeable of the child abuse/neglect law in Missouri and that they report suspected child abuse/neglect to the hotline.

ii. Describe any variations in the standard(s) by category of care (i.e. Center, FCC, Inhome), licensing status (i.e. licensed, license-exempt), and the age of the children in care.

There are no variations.

iii. The Lead Agency must certify that the identified health and safety standard(s) is(are) in effect and enforced through monitoring. Provide the citation(s) for the standard(s), including citations for both licensed and license-exempt providers. Missouri statute (§ 210.115.1, RSMo)

b. Pre-Service and Ongoing Training

i. Provide the citation(s) for these training requirements, including citations for both licensed and license-exempt providers.

13 CSR 35-32.070 and 13 CSR 35-32.090

ii. Describe any variations in training requirements for the standard(s). Do training requirements vary by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), or the age of the children in care?

There are no variations.

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requires this traini	e compliance, certify by checking below how the state/territory ng topic be completed by providers during either pre-service or ion period within three (3) months of hire.
✓ Pre-Service	
Orientation	within three (3) months of hire
caregivers, teache	territory require that this training topic be completed before ers, and directors are allowed to care for children unsupervised?
✓ Yes	
☐ No	
•	ers receive updated information and/or training regarding the
standard(s)? This	description should include methods to ensure that providers are
able to maintain a standards above.	nd update the health and safety practices as described in the
The Lead Agency	sends information to providers through email via the state's Gov
	and the electronic time and attendance system (CCBIS). In addition, updated on the Lead Agency's website as needed.
5.3.12 PLEASE ENTER 'N COMPLETE QUESTION 5	A' IN THE TEXT BOXES 'i', 'ii', AND 'iii' BELOW, AND .3.12b
a. PLEASE ENTER 'QUESTION 5.3.12b	NA' IN THE TEXT BOXES 'i', 'ii', AND 'iii' BELOW, AND COMPLETE
i. Please enter 'N/	A' below
N/A	
ii. Please enter 'N	A' below
N/A	

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iii. Please enter 'NA' below

N/A

5.3.12 Child Development. Lead Agencies are required to describe in their plan how training addresses child development principles, including the major domains of cognitive, social, emotional, physical development and approaches to learning (98.44(b)(1)(iii)).

- b. Pre-Service and Ongoing Training
- i. Describe the training content and provide the citation(s) for the training requirement(s). Include citations for both licensed and license-exempt providers

 The Lead Agency's early learning standards were revised in February 2021 and are available at: https://dese.mo.gov/early-extended-learning/early-learning/missouri-early-learning-standards. Lead Agency staff are working on updating the related training on the Missouri Early Learning Standards (MELS). The Lead Agency has been conducting a pilot project for training on developmental milestones MMM with WIC and child care offices that use the CDC Learn the Sign/Act Early materials. In 2021, the pilot project was scaled up to statewide access to the training materials. These activities are funded by the Missouri Preschool Development Grant Birth to Five as part of the Year 2 activities available on the grant website at: https://dese.mo.gov/quality-schools/early-learning/PDGB-5.
- ii. Describe any variations in training requirements for this topic. Do training requirements vary by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), or the age of the children in care?

 Once the training on early learning standards is available in 2022, the Lead Agency will require this training for licensed child care providers. However, the training will be strongly encouraged but not required for unlicensed child care providers.
- iii. To demonstrate compliance, certify by checking below how the state/territory requires this training topic be completed by providers during either pre-service or during an orientation period within three (3) months of hire.

☑ Pre-Service				
Orientation	within three	(3) mo	nths of	hire

iv. Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?

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	Yes
V	No

v. How do providers receive updated information and/or training regarding this topic? This description should include methods to ensure that providers are able to maintain and update their understanding of child development principles as described in the topic above.

The Lead Agency sends information to providers through email via the state's Gov Delivery system and CCBIS, the electronic time and attendance system. In addition, the standards are updated on the Lead Agency's website as needed.

5.3.13 Provide the number of hours of ongoing training required annually for eligible CCDF providers in the following settings (658E(c)(2)(G)(iii):

a. Licensed child care centers:

Caregivers in licensed child care centers are required to have 12 clock hours of training approved by the Lead Agency from January 1 to December 31 of each year.

b. License-exempt child care centers:

Caregivers in license-exempt centers are required to have six hours annually. Schools that are exempt from licensure per Missouri statute (§SMo) are allowed to follow their school's professional development plan. Citation:

https://revisor.mo.gov/main/OneSection.aspx?section=210.201&bid=48795&hl=.

c. Licensed family child care homes:

Caregivers in licensed child care centers are required to have 12 clock hours of training approved by the Lead Agency from January 1 to December 31 of each year.

d. License-exempt family child care homes:

Six hours annually.

e.Regulated or registered In-home child care:

Six hours annually.

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	Six hours annually.
com	4 In addition to the required standards, does the Lead Agency require providers to ply with the following optional standards? If checked, describe the standards, how the training is required and include the citation. (Please check all that apply)
	a. Nutrition: Describe:
	□ b. Access to physical activity: Describe:
	c. Caring for children with special needs: Describe:
	☐ d. Any other areas determined necessary to promote child development or to protect childrenâs health and safety (98.44(b)(1)(iii)). Describe:

5.4 Monitoring and Enforcement Policies and Practices for CCDF Providers

5.4.1 Enforcement of licensing and health and safety requirements.

f. Non-regulated or registered in-home child care:

Lead agencies must certify that procedures are in effect to ensure that all child care providers caring for children receiving CCDF services comply with all applicable state and local health and safety requirements, including those described in 98.41 (98.42(a)). This may include, but is not limited to, any systems used to ensure that providers complete health and safety trainings, any documentation required to be maintained by child care providers, or any other monitoring procedures to ensure compliance. Note: Inspection requirements are described starting in 5.4.2.

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a. To certify, describe the procedures to ensure that CCDF providers comply with the required Health and Safety Standards as described in Section 5.3.

The Lead Agency monitors all licensed or registered child care providers for compliance with the required Health and Safety Standards. The Lead Agency's monitoring takes place prior to the provider's initial registration and again prior to renewal. The Lead Agency will not enter into an agreement with the provider until the Health and Safety Standards are met.

b. To certify, describe the procedures to ensure that CCDF providers comply with the required Health and Safety Training as described in Section 5.3.

The Lead Agency reviews training records during the monitoring process to ensure compliance with the training requirements.

c. To certify, describe the procedures to ensure that CCDF providers comply with all other applicable state and local health, safety, and fire standards.

The Lead Agency's monitoring also includes verification that all state and local health, safety, and fire standards are met.

5.4.2 Inspections for licensed CCDF providers.

Lead agencies must require licensing inspectors to perform inspections - with no fewer than one pre-licensure inspection for compliance with health, safety, and fire standards - of each child care provider and facility in the state/territory. Licensing inspectors are required to perform no fewer than one annual, unannounced inspection of each licensed CCDF provider for compliance with all child care licensing standards; it shall include an inspection for compliance with health and safety (including, but not limited to, those requirements described in 98.41) and fire standards; inspectors may inspect for compliance with all three standards - health, safety, and fire - at the same time (658E(c)(2)(K)(i)(II); 98.16 (n); 98.42(b)(2)(i)).

Certify by describing, in the questions below, your state/territory's monitoring and enforcement procedures to ensure that licensed child care providers comply with licensing standards, including compliance with health and safety (including, but not limited to, those requirements described in 98.41) and fire standards.

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a. Licensed CCDF center-based child care

i. Describe your state/territory's policies and practices for pre-licensure inspections of licensed child care center providers for compliance with health, safety, and fire standards.

Prior to issuance of a child care center license, the child care provider is required to take the online licensing orientation which can be found at:

https://health.mo.gov/safety/childcare/licensed.php. After completing the licensing orientation, the child care provider can submit an application for licensure. The Lead Agency's Child Care Facility Specialist (CCFS) schedules an appointment with the provider within 20 days to conduct an onsite inspection of the facility and/or a blueprint review for the provider to come to the office to discuss any changes/corrections needed to the physical plant before moving forward with any construction. During the onsite inspection or blueprint review, the CCFS reviews the process for licensure and the licensing rules. The CCFS requests a fire inspection from the DHSS Division of Fire Safety and a sanitation inspection from the DHSS Division of Community and Public Health. After the site inspection or blueprint review has been conducted, the provider is responsible for contacting the CCFS to let them know when they have completed the required physical plant corrections and when they are ready for another site visit or if they are ready for their initial inspection to be completed. The CCFS conducts an announced inspection to verify compliance with all licensing rules and provides the licensee with a copy of the inspection via email with any required corrections. Additional inspections are conducted to verify compliance as necessary until the licensee has met compliance for all licensing rules in regard to: the organization and administration of the entity; licensing process documents; physical requirements; fire safety; disaster and emergency preparedness; furniture, equipment, and materials; personnel; staff/child ratios; medical examinations; admission policies and procedures; nighttime care; child care program; health care; nutrition and food service; transportation and field trips; and records and reports.

ii. Describe your state/territory's policies and practices for annual, unannounced inspections of licensed CCDF child care center providers.

Licensed child care centers receive, at minimum two unannounced inspections during each year from the CCFS. The CCFS notes any non-compliances identified during the inspection and sends the provider a copy of their inspection report via email. During

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compliance monitoring inspections, the CCFS conducts a physical inspection of the entire premises (inside and outside) to identify any potential licensing rule violations. The CCFS counts the number of children and number of staff to determine staff/child ratios and reviews a percentage of staff and children's files to determine compliance. The inspection report identifies if the violation was corrected during the inspection, if the provider is required to submit documentation for compliance, or if the CCFS will be making a return inspection to verify compliance. If the provider has not submitted documentation or is not in compliance within three months, then the CCFS makes a return inspection to verify compliance. Failure to correct violations noted during inspections may result in disciplinary action against the license. In addition to the CCFS conducting inspections, child care center programs receive annual fire safety and sanitation inspections.

		•		4.5
III. Identii	v the fred	auency of	unannounced i	nspections:

A. Once a year

■ B. More than once a year

Describe:

Once a program has achieved licensure, inspections are conducted, at minimum, two times a year and are all unannounced. Depending on violations noted and other circumstances such as complaint investigations, a child care program may receive additional unannounced inspections throughout the year.

iv. If applicable, describe the differential monitoring process and how these inspections ensure that child care center providers continue to comply with the applicable licensing standards, including health, safety, and fire standards.

N/A

v. List the citation(s) for your state/territory's policies regarding inspections for licensed CCDF center providers

Licensed Group Child Care Homes/Child Care Center available at: https://s1.sos.mo.gov/cmsimages/adrules/csr/current/19csr/19c30-62.pdf.

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5.4.2 Inspections for licensed CCDF providers.

Lead agencies must require licensing inspectors to perform inspections - with no fewer than one pre-licensure inspection for compliance with health, safety, and fire standards - of each child care provider and facility in the state/territory. Licensing inspectors are required to perform no fewer than one annual, unannounced inspection of each licensed CCDF provider for compliance with all child care licensing standards; it shall include an inspection for compliance with health and safety (including, but not limited to, those requirements described in 98.41) and fire standards; inspectors may inspect for compliance with all three standards - health, safety, and fire - at the same time (658E(c)(2)(K)(i)(II); 98.16 (n); 98.42(b)(2)(i)).

Certify by describing, in the questions below, your state/territory's monitoring and enforcement procedures to ensure that licensed child care providers comply with licensing standards, including compliance with health and safety (including, but not limited to, those requirements described in 98.41) and fire standards.

b. Licensed CCDF family child care home

i. Describe your state/territory's requirements for pre-licensure inspections of licensed family child care providers for compliance with health, safety, and fire standards. Prior to issuance of a family child care home license, the child care provider is required to take the online licensing orientation which can be found at:

https://health.mo.gov/safety/childcare/licensed.php. After completing the licensing orientation, the child care provider can submit an application for licensure. The Lead Agency's Child Care Facility Specialist (CCFS) schedules an appointment with the provider within twenty 20 days to conduct an onsite inspection of the facility to determine if there are any violations in regard to the physical plant. During the onsite inspection, the CCFS reviews the process for licensure and the licensing rules. The CCFS requests a fire inspection from the DHSS Division of Fire Safety and a sanitation inspection from the DHSS Division of Community and Public Health. After the site inspection has been conducted, the child care provider is responsible for contacting the CCFS to let them know when they have completed the required physical plant corrections and when they are ready for their initial inspection to be

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completed. The CCFS conducts an announced inspection to verify compliance with all licensing rules and provides the licensee with a copy of the inspection via email with any required corrections. Additional inspections are conducted to verify compliance as necessary until the licensee has met compliance for all licensing rules in regard to: the organization and administration of the entity; licensing process documents; physical requirements; fire safety; disaster and emergency preparedness; furniture, equipment, and materials; personnel; staff/child ratios; medical examinations; admission policies and procedures; nighttime care; child care program; health care; nutrition and food service; transportation and field trips; and records and reports.

ii. Describe your state/territory's policies and practices for annual, unannounced inspections of licensed CCDF family child care providers.

Licensed child care centers receive, at minimum two unannounced inspections during each year from the CCFS. The CCFS notes any non-compliances identified during the inspection and sends the provider a copy of their inspection report via email. During compliance monitoring inspections, the CCFS conducts a physical inspection of the entire premises (inside and outside) to identify any potential licensing rule violations. The CCFS counts the number of children and number of staff to determine staff/child ratios and reviews a percentage of staff and children's files to determine compliance. The CCFS notes any non-compliances identified during the inspection and sends the provider a copy of their inspection report via email. The inspection report identifies if the violation was corrected during the inspection, if the provider is required to submit documentation for compliance, or if the CCFS will be making a return inspection to verify compliance. If the provider has not submitted documentation or is not in compliance within three months, then the CCFS makes a return inspection to verify compliance. Failure to correct violations noted during inspections may result in disciplinary action against the license. In addition to the CCFS conducting inspections, child care center programs receive annual fire safety and sanitation inspections.

III.	identify the frequency of unannounced inspections:
	☐ A. Once a year
	☑ B. More than once a year
	Describe:

Once a child care provider is licensed, inspections are conducted, at minimum, two

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times a year and are all unannounced. Depending on violations noted and other circumstances such as complaint investigations, a child care provider may receive additional unannounced inspections throughout the year.

iv. If applicable, describe the differential monitoring process and how these inspections ensure that family child care providers continue to comply with the applicable licensing standards, including health, safety, and fire standards. N/A

v. List the citation(s) for your state/territory's policies regarding inspections for licensed CCDF family child care providers

Licensed Family Child Care Homes available at:

https://s1.sos.mo.gov/cmsimages/adrules/csr/current/19csr/19c30-61.pdf

5.4.2 Inspections for licensed CCDF providers.

Lead agencies must require licensing inspectors to perform inspections - with no fewer than one pre-licensure inspection for compliance with health, safety, and fire standards - of each child care provider and facility in the state/territory. Licensing inspectors are required to perform no fewer than one annual, unannounced inspection of each licensed CCDF provider for compliance with all child care licensing standards; it shall include an inspection for compliance with health and safety (including, but not limited to, those requirements described in 98.41) and fire standards; inspectors may inspect for compliance with all three standards - health, safety, and fire - at the same time (658E(c)(2)(K)(i)(II); 98.16 (n); 98.42(b)(2)(i)).

Certify by describing, in the questions below, your state/territory's monitoring and enforcement procedures to ensure that licensed child care providers comply with licensing standards, including compliance with health and safety (including, but not limited to, those requirements described in 98.41) and fire standards.

c) Licensed in-home CCDF child care

i. Does your state/territory license in-home child care (care in the childâs own hom	າe)?
✓ No (Skip to 5.4.3 (a)).	
Yes. If yes, answer A-D below:	
A. Describe your state/territory's policies and practices for pre-licensure insp	ections
of licensed in-home care (care in the child's own) providers for compliance w	vith

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health, safety, and fire standards.

B. Describe your state/territory's policies and practices for annual, unannounced inspections of licensed CCDF child care in-home care (care in the child's own home) providers.

C. I	dentify the frequency of unannounced inspections:
- 1	🗖 1. Once a year
- 1	2. More than once a year
	Describe:

D. If applicable, describe the differential monitoring process and how these inspections ensure that in-home care (care in the child's own providers continue to comply with the applicable licensing standards, including health, safety, and fire standards.

E. List the citation(s) for your state/territory's policies regarding inspections for licensed CCDF in-home care (care in the child's own home) providers.

5.4.2 Inspections for licensed CCDF providers.

Lead agencies must require licensing inspectors to perform inspections - with no fewer than one pre-licensure inspection for compliance with health, safety, and fire standards - of each child care provider and facility in the state/territory. Licensing inspectors are required to perform no fewer than one annual, unannounced inspection of each licensed CCDF provider for compliance with all child care licensing standards; it shall include an inspection for compliance with health and safety (including, but not limited to, those requirements described in 98.41) and fire standards; inspectors may inspect for compliance with all three standards - health, safety, and fire - at the same time (658E(c)(2)(K)(i)(II); 98.16 (n); 98.42(b)(2)(i)).

Certify by describing, in the questions below, your state/territory's monitoring and enforcement procedures to ensure that licensed child care providers comply with licensing standards, including compliance with health and safety (including, but not limited to, those requirements

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described in 98.41) and fire standards.

d) List the entity(ies) in your state/territory that are responsible for conducting pre-licensure inspections and unannounced inspections of licensed CCDF providers

The Lead Agency's Section for Child Care Regulations

5.4.3 Inspections for license-exempt center-based and family child care providers.

The Lead Agency must have policies and practices that require licensing inspectors (or qualified monitors designated by the Lead Agency) to perform an annual monitoring visit of each license-exempt CCDF provider for compliance with health, safety, and fire standards (658E(c)(2)(K)(i)(IV); 98.42(b)(2)(ii)). Inspections for relative providers will be addressed in question 5.6.4. At a minimum, the health and safety requirements to be inspected must address the standards listed in subsection 5.3 (98.41(a)).

To certify, describe the policies and practices for the annual monitoring of:

a. License-exempt center-based CCDF providers, including if monitoring is announced or unannounced, occurs more frequently than once per year, and if differential monitoring is used.

The Lead Agency's Section for Child Care Regulation (SCCR) conducts initial inspections of license-exempt (religious organizations) to determine compliance with rules for License-Exempt Child Care Facilities and makes requests to the DHSS Division of Fire Safety for a fire inspection and to the DHSS Division of Community and Public Health for a sanitation inspection. The rules for license-exempt facilities do not include all of the health and safety requirements for CCDF providers and the Lead Agency contracts with another agency to perform monitoring inspections. After initial approval, SCCR staff conduct announced annual inspections. During the annual inspections, SCCR staff verify compliance with license-exempt rules to include comprehensive background screening requirements. The Registered Child Care Provider Monitoring Unit conducts an unannounced onsite inspection to ensure the child care applicant's facility is in compliance with health, safety, fire, and other requirements. The Registered Child Care

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Provider Monitoring Unit conducts initial monitoring visits of license-exempt programs (religious organizations, public schools, summer programs, and businesses) to determine compliance with health and safety standards. These monitoring visits are unannounced and occur yearly if the provider wishes to renew their registration.

i. Provide the citation(s) for this policy or procedure

Missouri statute (§ 210.252.1, RSMo) requires all buildings and premises used by a child care facility to be inspected annually by fire and safety by the state fire marshal and for health and sanitation by the DHSS. Citation:

https://revisor.mo.gov/main/OneSection.aspx?section=210.252&bid=48798

b. License-exempt family child care CCDF providers, including if monitoring is announced or unannounced, occurs more frequently than once per year, and if differential monitoring is used.

The Lead Agency's Registered Child Care Provider Monitoring Unit conducts an unannounced monitoring visit upon initial application and then annually if the provider wishes to renew their registration.

i. Provide the citation(s) for this policy or procedure

Missouri statute (§ 210.027) and 13 CSR 35-32 which can be found at: https://si.sos.mo.gov/cmsimages/adrules/csr/current/19csr/19c30-60.pdf

5.4.4 Inspections for license-exempt in-home care (care in the child's own home).

Lead Agencies have the option to develop alternate monitoring requirements for care provided in the child's home that are appropriate to the setting. A child's home may not meet the same standards as other child care facilities and this provision gives Lead Agencies flexibility in conducting more streamlined and targeted on-site inspections. For example, Lead Agencies may choose to monitor in-home providers on basic health and safety requirements such as training and background checks. Lead Agencies could choose to focus on health and safety risks that pose imminent danger to children in care. This flexibility cannot be used to bypass the monitoring requirement altogether. States should develop procedures for notifying parents of monitoring protocols and consider whether it would be appropriate to obtain parental permission

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prior to entering the home for inspection (98.42(b)(2)(iv)(B)).

a. To certify, describe the policies and practices for the annual monitoring of licenseexempt in-home care, including if monitoring is announced or unannounced, occurs more frequently than once per year, and if differential monitoring procedures are used.

N/A Missouri does not have licensed in-home child care providers.

b. Provide the citation(s) for this policy or procedure.

N/A

c. List the entity(ies) in your state/territory that are responsible for conducting inspections of license-exempt CCDF providers:

N/A

5.4.5 Licensing Inspectors (or qualified inspectors designated by the Lead Agency).

Lead Agencies will have policies and practices that ensure that individuals who are hired as licensing inspectors (or qualified monitors designated by the Lead Agency) are qualified to inspect child care providers and facilities and have received health and safety training appropriate to the provider setting and age of the children served. Training shall include, but is not limited to, those requirements described in 98.41(a)(1) and all aspects of the stateâs licensure requirements (658E(c)(2)(K)(i)(I); 98.42(b)(1-2)).

a. To certify, describe how the Lead Agency ensures that licensing inspectors (or qualified monitors designated by the Lead Agency) are qualified to inspect child care facilities and providers

The minimum qualifications for the Lead Agency's Child Care Facility Specialist (CCFS) are a bachelor's degree from an accredited college or university with a minimum of 15 earned credit hours in one or a combination of the following: Elementary or Early Childhood Education, Sociology, Psychology, Child Development, Social Work, Nursing, or a closely related field; and two or more years of professional experience in the licensing of child care facilities, elementary or early childhood education, social services for children (e.g. child abuse and neglect complaint investigations, foster child care resource/referral, etc.), child health services, or experience in the provision of child care

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in a licensed child care home or a licensed or regulated child care facility.

The minimum qualifications for the Lead Agency's Monitoring Specialist is a bachelor's degree from an accredited college or university, with a minimum of fifteen 15 earned credit hours in one, or a combination of, the following fields: elementary or early childhood education, sociology, psychology, child development, social work, nursing, or a

b. To certify, describe how inspectors and monitors have received training on health and safety requirements that are appropriate to the age of the children in care and the type of provider setting (98.42(b)(1-2)).

New CCFS staff in the Lead Agency receive on-the-job training, which includes mentoring from supervisors and seasoned staff. Within six months of hire, CCFS staff receive 16 hours of orientation training which includes an overview of child care regulation in Missouri; ethics in regulations; child abuse and neglect mandated reporting and awareness; critical thinking; phases of licensing; conducting and managing complaint investigations; child care regulation and the disciplinary process; immunization training; emergency preparedness; and cultural competency, diversity and inclusion awareness; licensing process. In addition to the required training, the CCFS staff are required to complete CCDF Health and Safety regulation training and Early Childhood Social and Emotional Health training. All CCFS staff are required to obtain a minimum of 12 hours of professional development training each calendar year to expand their knowledge in regulation, health, safety, early childhood and child related areas. The Lead Agency's monitoring staff completes "Train the Trainer" sessions upon hire and receive 12 clock hours of training in early childhood education or related fields annually. Additional trainings may be required by the Lead Agency.

c. Provide the citation(s) for this policy or procedure.

closely related field.

For CCFS, this training is part of the Lead Agency's current Regulatory Procedure Manual and for contracted monitors, this is included as a requirement in the contract for monitoring services.

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5.4.6 The states and territories shall have policies and practices that require the ratio of licensing inspectors to child care providers and facilities in the state/territory to be maintained at a level sufficient to enable the state/territory to conduct effective inspections of child care providers and facilities on a timely basis in accordance with federal, state, and local laws (658E(c)(2)(K)(i)(III); 98.42(b)(3)).

a. To certify, describe the state/territory policies and practices regarding the ratio of licensing inspectors to child care providers (i.e. number of inspectors per number of child care providers) and facilities in the state/territory and include how the ratio is sufficient to conduct effective inspections on a timely basis.

The number of licensing inspectors is subject to appropriations for personnel services. The Lead Agency's Regulatory Procedure Manual outlines the required number of inspections that are required to be conducted each year, as well as provide guidance to licensing staff to ensure effective inspections are conducted timely. The licensing unit is currently operating under a weighted caseload approach where the number of facilities per CCFS is determined by weight. The weight of a facility is based on the facility type; capacity; distance from the home base; and the number of complaints the facility has received in the last year. The licensing unit is currently piloting a project where CCFS duties in two districts are divided up by complaints versus licensing processes, which means some CCFS's conduct complaint investigations while other CCFS's conduct licensing inspections.

b. Provide the policy citation and state/territory ratio of licensing inspectors.

The current average weighted caseload is a weight of 69.33 per CCFS and outlined in the Lead Agency's Regulatory Procedure Manual.

5.5 Comprehensive Background Checks

The CCDBG Act requires states and territories to have in effect requirements, policies and procedures to conduct comprehensive background checks for all child care staff members (including prospective staff members) of all child care programs that are 1) licensed, regulated,

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or registered under state/territory law; or, 2) all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers) (98.43(a)(1)(i)). Background check requirements apply to any staff member who is employed by a child care provider for compensation, including contract employees and self-employed individuals; whose activities involve the care or supervision of children; or who has unsupervised access to children (98.43(2)). For family child care homes, this requirement includes the caregiver and any other adults residing in the family child care home who are age 18 or older (98.43(2)(ii)(C)). This requirement does not apply to individuals who are related to all children for whom child care services are provided (98.43(2)(B)(ii)). Exemptions for relative providers will be addressed in 5.6.5.

A comprehensive background check must include eight (8) separate and specific components (98.43(2)(b)), which encompass three (3) in-state checks, two (2) national checks, and three (3) interstate checks (if the individual resided in another state in the preceding 5 years).

5.5.1 Background Check Requirements. In the table below, certify by checking that the state has policies, and is conducting checks for the required background check components, ensuring that these requirements are in place for all licensed, regulated, or registered child care providers and for all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i), 98.43(a)(2) and 98.16(o).

- a. Components of In-State Background Checks
 - i. Criminal registry or repository using fingerprints in the current state of residency
 - Licensed, regulated, or registered child care providers

Citation:

Section 210.1080, RSMo

✓ All other providers eligible to deliver CCDF Services

Citation:

Section 210.1080, RSMo

ii. Sex offender registry or repository check in the current state of residency

Licensed, regulated, or registered child care providers

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Section 210.1080, RSMo

☑ All other providers eligible to deliver CCDF Services

Citation:

Section 210.1080, RSMo

- iii. Child abuse and neglect registry and database check in the current state of residency
 - ✓ Licensed, regulated, or registered child care providers

Citation:

Section 210.1080, RSMo

All other providers eligible to deliver CCDF Services Citation:

Section 210.1080, RSMo

- 5.5.1 Background Check Requirements. In the table below, certify by checking that the state has policies, and is conducting checks for the required background check components, ensuring that these requirements are in place for all licensed, regulated, or registered child care providers and for all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i), 98.43(a)(2)
- (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i), 98.43(a)(2) and 98.16(o).
 - b. Components of National Background Check
 - i. FBI Fingerprint Check
 - Licensed, regulated, or registered child care providers Citation:

Section 210.1080, RSMo

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All other providers eligible to deliver CCDF Services Citation:
Section 210.1080, RSMo

ii. National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) name-based search

Licensed, regulated, or registered child care providers Citation:

Section 210.1080, RSMo

All other providers eligible to deliver CCDF Services Citation:

Section 210.1080, RSMo

5.5.1 Background Check Requirements. In the table below, certify by checking that the state has policies, and is conducting checks for the required background check components, ensuring that these requirements are in place for all licensed, regulated, or registered child care providers and for all other providers eligible to deliver CCDF services

(e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i), 98.43(a)(2) and 98.16(o).

- c. Components of Interstate Background Checks
 - i. Criminal registry or repository in any other state where the individual has resided in the past 5 years, with the use of fingerprints being optional.

Note: It is optional to use a fingerprint to conduct this check. Searching a general public facing judicial website does not satisfy this requirement. This check must be completed in addition to the national FBI history check to mitigate any gaps that may exist between the two sources (unless the responding state participates in the National Fingerprint File program).

Licensed, regulated, or registered child care providers

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Section 210.1080, RSMo

☑ All other providers eligible to deliver CCDF Services

Citation:

Section 210.1080, RSMo

ii. Sex offender registry or repository in any other state where the individual has resided in the past 5 years.

Note: It is optional to use a fingerprint to conduct this check. This check must be completed in addition to the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) to mitigate any gaps that may exist between the two sources.

Licensed, regulated, or registered child care providers

Citation:

Section 210.1080, RSMo

✓ All other providers eligible to deliver CCDF Services

Citation:

Section 210.1080, RSMo

iii. Child abuse and neglect registry and database in any other state where the individual has resided in the past 5 years

Note: This is a name-based search

✓ Licensed, regulated, or registered child care providers

Citation:

Section 210.1080, RSMo

✓ All other providers eligible to deliver CCDF Services

Citation:

Section 210.1080, RSMo

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5.5.2 Procedures for a Provider to Request a Background Check.

Child care providers are required to submit requests for background checks for each of their staff members to the appropriate state or territorial agency, which is to be defined clearly on the state or territory Web site. Family child care home providers must also submit background check requests for all household members over the age of 18. The requests must be submitted prior to when the individual becomes a staff member and must be completed at least once every five years per § 98.43(d)(1) and (2). The state or territory must ensure that its policies and procedures under this section, including the process by which a child care provider or other state or territory may submit a background check request, are published on the web site of the state or territory as described in § 98.43(g) and the web site of local lead agencies.

a. Describe the state/territory procedure(s) for a provider to request the required background checks. If the process is different based on provider type, please include that in this description. If the process is different based on each background check component, please include that in this description.

The process for providers to request the required background screening is as follows: (1) Individual child care staff members (including household members over the age of 18, and those under the age of 18 that have been certified as an adult for the commission of a crime, of family child care home providers) must register through the Missouri Automated Criminal History Site (MACHS) by following the instructions on the Missouri State Highway Patrol Applicant Fingerprint Services form; (2) The child care provider must complete and submit the Employer Criminal Background Check Notification form to the Background Screening Unit. If a staff member has lived in any other state(s) besides Missouri within the past five years, then the Lead Agency may contact the provider and/or staff member to provide contact information for that state so the staff member can request the Child Abuse/Neglect registry screening and a criminal history check if that state is a non-national fingerprint file state; (3) All individuals required to have a background screening must register (if not already registered) with the Missouri Family Care Safety Registry and the provider must request a background screening.

b. The state/territory must ensure that fees charged for completing the background checks do not exceed the actual cost of processing and administration, regardless of whether they are conducted by the state/territory or a third-party vendor or contractor.

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What are the fees and how do you ensure that these fees do not exceed the actual cost of processing and administering the background checks? Lead Agencies can report that no fees are charged if applicable (98.43(f)).

As of 2021, fees for background checks are \$43.05 with \$20 for Missouri State, \$14.75 for FBI and \$8.30 for processing. The cost is per the Missouri State Highway Patrol. State representatives outside of Missouri may conduct a name-based search through the Missouri State Highway Patrol. This request requires a payment of \$14.00. Using form MO 300-1590, the state representative would check the boxes 1 and 6 in Section A and fill out the identifying data. By checking boxes 1 and 6, they are requesting child abuse or neglect records, Missouri criminal background records, and Missouri sex offender records. Once the form is completed, it will be mailed along with payment to Missouri State Highway Patrol, Criminal Justice Information Services Division, P.O. Box 9500, Jefferson City, MO 65102.

c. Describe the state/territory policy(ies) related to prospective staff members working on a provisional basis. Pending completion of all background check components in 98.43(b), the prospective staff member must be supervised at all times by an individual who received a qualifying result on a background check described in 98.43(b) within the past 5 years (98.43(c)(4)) and the prospective staff member must have completed and received satisfactory results on either the FBI fingerprint check or a fingerprint check of the state/territory criminal registry or repository in the state where the prospective staff member resides. Describe and include a citation for the Lead Agencyâs policy: A prospective child care staff member may begin work for a child care provider after the qualifying result of either a FBI fingerprint check or a search of the Missouri criminal registry or repository with the use of fingerprints has been received from the designated department; however, pending completion of the criminal background check, the prospective child care staff member shall be supervised at all times by another child care staff member who received a qualifying result on the criminal background check within the past five years, per Missouri Statue (§ 210.1080, RSMo). Child care staff members who have lived in another state in the last five years must complete fingerprinting through Missouri Automated Criminal History Site (MACHS). After receipt of the Employer Criminal Background Check Notification form, the background screening unit reviews the fingerprint and Missouri Family Care Safety Registry results and if the applicant qualifies, the Lead Agency's Background Screening Unit will send the individual and the provider a temporary eligible letter indicating that the child care staff member must be supervised at

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all times by someone who has an eligible letter on file within the last five years. Missouri statute (§ 210.1080 RSMo) and 19 CSR 30-63.020.

d. Describe the procedure for providers to request background checks for staff members that resided in another state within the previous 5 years.

The Lead Agency makes attempts to obtain the results from the other state. If attempt is made, but results not received, the Lead Agency moves forward without results. The child care provider must submit the Employer Criminal Background Check Notification form and check the appropriate box indicating that the child care staff member has resided in another state in the past five years and indicate the state(s) the child care staff member has resided in. The Lead Agency's Background Screening Unit then emails the child care provider with instructions on how to receive results from the other state(s).

e. Describe the procedure to ensure each staff member completes all components of the background check process at least once during each 5-year period. If your state enrolls child care staff members in the FBI Rap Back Program or a state-based rap back program, please include that in this description. Note: An FBI Rap Back program only covers the FBI Fingerprint component of the background check. If child care staff members are enrolled in a state-based rap back, please indicate which background check components are covered by this service.

During the annual renewal process, the child care provider must submit an updated Comprehensive Background Screening form that lists all staff or household members. The Lead Agency staff compare the list to previous year(s) to determine when the last fingerprints were done and request results for any new staff or household members. After all components of the background screening process have been completed, the child care staff member receives an eligible letter if they qualify. The child care staff member is required to keep a copy of their letter and it can be used for five years from the date of the letter. The Lead Agency's staff verify compliance during unannounced inspections.

f. Describe the procedure to ensure providers who are separated from employment for more than 180 consecutive days receive a full background check.

Staff members' data is stored in a database by the Lead Agency that includes date of background checks as well as employer. The date of hire can be reviewed using the staff members' Missouri Professional Development Identification number (MOPD ID) and employment history. The Lead Agency can use this resource to track employment.

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Missouri leaves it up to the employer to ensure that the child care staff member has not been separated from employment for more than 180 days.

g. Provide the website link that contains instructions on how child care providers should initiate background check requests for a prospective employee (98.43(g)). https://dss.mo.gov/cd/child-care/child-care-providers/background-screening.htm https://health.mo.gov/safety/childcare/background-check-process.php

5.5.3 Procedures for a Lead Agency to Respond to and Complete a Background Check.

Once a request has been initiated, the state shall carry out the request of a child care provider for a criminal background check as expeditiously as possible, but not to exceed 45 days after the date on which such request was submitted. The Lead Agency shall make the determination whether the prospective staff member is eligible for employment in a child care program (98.43(e)(1)). Lead Agencies must ensure the privacy of background checks by providing the results of the criminal background check to the requestor or identified recipient in a statement that indicates whether a child care staff member (including a prospective child care staff member or a family child care household member over the age of 18) is eligible or ineligible for employment, without revealing any documentation of criminal history or disqualifying crimes or other related information regarding the individual. In the following questions, describe the Lead Agency's procedures for conducting background checks. These responses should include:

- -- The name of the agency that conducts the investigation; include multiple names if multiple agencies are involved in different background check components
- -- How the Lead Agency is informed of the results of each background check component
- -- Who makes the determinations regarding the staff member's eligibility? Note: Disqualification decisions should align to the response provided in 5.5.7.
- -- How the Lead Agency ensures that a background check request is carried out as quickly as possible and not more than 45 days after a request is submitted.
 - a. Describe the procedures for conducting In-State Background Check requests and making a determination of eligibility.

During the registration application, the child care provider must submit a Comprehensive

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Background Screening Form that lists all staff or household members 18 and older, or under 18 years of age but have been certified as an adult in the commission of an offense. The Lead Agency uses this information to search for background results. If results are not found, then the Lead Agency sends a notice to the provider that requests the provider, staff, or a household member to complete the required background screening. The Lead Agency sends a second request two weeks later, giving the provider a full 30 days to complete the required actions. Once the Lead Agency's Background Screening Unit receives the Employer Criminal Background Check Notification form, then they review the FBI fingerprint results and the Family Care Safety Registry screening results to determine eligibility. If the child care staff member has not lived in another state in the last five years, a letter of eligibility or ineligibility is processed and sent to the child care staff member and to the child care provider.

 b. If the procedure is different for National Background checks, including the name-based NCIC NSOR check and FBI fingerprint check, please describe here.
 N/A

c. Describe the procedures for conducting Interstate Background Check requests and making a determination of eligibility. (Note this response should detail how a state conducts an interstate check for a provider who currently lives in their state or territory but has lived in another state(s) within the previous five years).

For any out of state background results, the Lead Agency uses resources available to direct the individual regarding how to get a copy of their results. Once received, the documents are reviewed for eligibility. The process for providers to request the required background screening is as follows: (1) Individual child care staff members must register through the Missouri Automated Criminal History Site (MACHS) by following the instructions on the Missouri State Highway Patrol Applicant Fingerprint Services form; (2) The child care provider must complete and submit the Employer Criminal Background Check Notification form to the Lead Agency's Background Screening Unit. If a staff member has lived in any other state(s) besides Missouri within the past five years, then the Lead Agency may contact the provider and/or staff member to provide contact information for that state so the staff member can request the Child Abuse/Neglect registry screening and a criminal history check if that state is a non-national fingerprint file state; (3) All individuals required to have a background screening must register (if not already registered) with the Family Care Safety Registry and the provider must request a

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background screening. Once the Background Screening Unit receives the Employer Criminal Background Check Notification form, they review the FBI fingerprint results and the Family Care Safety Registry screening results to determine eligibility. They also determine if the child care staff member has lived in another state over the last five years. If the child care staff member has lived in another state over the last five years, then the Lead Agency's Background Screening Unit sends a temporary eligible letter with instructions to the child care provider that explains the process for requesting results from those states. The temporary eligible letter states that the child care staff member must be supervised at all times by someone who has received qualifying results within the last five years. After verification that the background screening was requested from other states, the Lead Agency's Background Screening Unit will wait a total of 45 days to receive the results from the other state(s). Once the results are received, and if an individual is cleared, the Background Screening Unit will send a permanent eligible letter.

d. Describe the procedure the Lead Agency has in place to make an eligibility determination in the event not all the components of the background check are completed within the required 45-day timeframe.

If an in-state background check is not complete, the prospective registered provider's registration is denied for not meeting registration requirements. If the only component missing is the interstate check, eligibility can be determined based on in-state results. After verification that the background screening was requested for other states, the Lead Agency's Background Screening Unit will wait a total of 45 days to receive the results from the other state(s). If results from other states are not received within 45 days, the child care staff member is then sent a permanent eligible letter.

e. Describe procedures for conducting a check when the state of residence is different than the state in which the staff member works.

The process is the same for an out of state resident.

5.5.4 State designation as a "Compact State" and participation in the National Fingerprint File program.

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a. "Compact States" are states that have ratified the National Crime Prevention and Privacy Compact Act of 1998 in order to facilitate electronic information sharing for noncriminal justice purposes (such as employment) among the Federal Government and states. More information can be found here: https://www.fbi.gov/services/cjis/compact-council. The Compact allows signatory states to disseminate its criminal history record information to other states for noncriminal justice purposes in accordance with the laws of the receiving state. For the most up-to-date Compact States and Territories map visit: https://www.fbi.gov/services/cjis/compact-council/maps. Is your state or territory a Compact State?

No
✓ Yes

b. The National Fingerprint File (NFF) is a database of fingerprints, or other unique personal identification information relating to an arrested or charged individual, which is maintained by the FBI to provide positive fingerprint identification of record subjects. Only a state or territory that has ratified the Compact (a Compact State) may join the NFF program. An FBI fingerprint check satisfies the requirement to perform an interstate check of another state's criminal history record repository if the responding state (where the child care staff member has resided within the past 5 years) participates in the NFF program. It is unnecessary to conduct both the FBI fingerprint check and the search of an NFF state's criminal history record repository (refer to CCDF-ACF-PIQ-2017-01). For the most up-to-date NFF Participation map visit: https://www.fbi.gov/services/cjis/compact-council/maps. Is your state or territory an NFF State?

□ No
□ Yes

5.5.5 Procedures for a Lead Agency to Respond to Interstate Background Checks:

a. Interstate Criminal History Registry Check Procedures

Provide a description of how the state or territory responds to interstate criminal history check requests from another state and whether there are any laws or policies that prevent the state from releasing certain criminal history information to an out-of-state entity for civil purpose (i.e., for purposes of determining employment eligibility).

Applicants residing outside Missouri who need a fingerprint-based Missouri or Missouri and national criminal history background check (subject to authorization) performed through the Missouri State Highway Patrol may contact the local law enforcement agency in their state for fingerprint assistance. Fingerprints and personal identifying information

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must be completed on a FBI standardized Applicant Fingerprint Card (FD-258). Both ink and electronic fingerprint images are accepted by the Missouri State Highway Patrol; however, electronic transmission from agencies outside of Missouri is not allowed. The completed applicant fingerprint card should be mailed with appropriate fees to the Missouri State Highway Patrol, CJIS Division, at Post Office Box 9500, Jefferson City, MO 65102-9500. Processing time for applicant fingerprints cards received by mail is approximately four to six weeks. Information for individuals and other states to request background checks from Missouri can be found online at: https://dss.mo.gov/cd/child-care/child-care-providers/background-screening.htm

b. Interstate Sex Offender Registry Check Procedures

Provide a description of how the state or territory responds to interstate sex offender history check requests from another state and whether there are any laws or policies that prevent the state from releasing certain sex offender information to an out-of-state entity for civil purpose (i.e., for purposes of determining employment eligibility). Employees from state agencies outside of the State of Missouri may conduct a name-based search through the Missouri State Highway Patrol. This request requires a payment of \$14.00. Using form MO 300-1590, the state employee would check the boxes 1 and 6 in Section A and fill out the identifying data. By checking boxes 1 and 6, they are requesting child abuse or neglect records, Missouri criminal background records, and Missouri sex offender records. Once the form is completed, it will be mailed along with payment to Missouri State Highway Patrol, Criminal Justice Information Services Division, P.O. Box 9500, Jefferson City, MO 65102. Information for individuals and other states to request background checks from Missouri can be found online at: https://dss.mo.gov/cd/child-care/child-care-providers/background-screening.htm.

c. Interstate Child Abuse and Neglect Registry Check Procedures

Provide a description of how the state or territory responds to interstate child abuse and neglect history check requests from another state and whether there are any laws or policies that prevent the state from releasing certain child abuse and neglect information to an out-of-state entity for civil purpose (i.e., for purposes of determining employment eligibility).

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Employees from state agencies outside of the State of Missouri may conduct a name-based search through the Missouri State Highway Patrol. This request requires a payment of \$14.00. Using form MO 300-1590, the state employee would check the boxes 1 and 6 in Section A and fill out the identifying data. By checking boxes 1 and 6, they are requesting child abuse or neglect records, Missouri criminal background records, and Missouri sex offender records. Once the form is completed, it will be mailed along with payment to Missouri State Highway Patrol, Criminal Justice Information Services Division, P.O. Box 9500, Jefferson City, MO 65102. Information for individuals and other states to request background checks from Missouri can be found online at: https://dss.mo.gov/cd/child-care/child-care-providers/background-screening.htm.

5.5.6 Consumer Education Website Links to Interstate Background Check Processes

Lead Agencies must have requirements, policies, and procedures in place to respond as expeditiously as possible to other States', Territories' and Tribes' requests for background checks in order to meet the 45-day timeframe (98.43(a)(1)(iii)). In addition, Lead Agencies are required to include on their consumer education website the process by which another Lead Agency may submit a background check request, along with all of the other background check policies and procedures (98.43 (g)).

State and Territory Lead Agencies are required to designate one page of their existing Consumer Education Website as a landing page for all interstate background check related processes and procedures pertaining to their own state. The purpose of having a dedicated interstate background check web page on the Lead Agency Consumer Education Website is to help state and territories implement the interstate background check requirements of the CCDBG Act (CCDF Consumer Education Website and Reports of Serious Injuries and Death (OMB #0970-0473)).

Check to certify that the required elements are included on the Lead Agency's consumer education website for each interstate background check component, and provide the direct URL/website link.

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Note: The links provided below should be a part of your consumer education website identified in 2.3.11.

a. Interstate (Criminal Background Check:
☑ i.	Agency Name
☑ ii	. Address
☑ ii	i. Phone Number
☑ iv	v. Email
□v	v. FAX
▽ ∨	ri. Website
n	rii. Instructions ((e.g. Does a portal/system account need to be created to nake a request? What types of identification are needed? What types of payment is accepted? How can a provider appeal the results? How will forms will be accepted and FAQs?)
☑ ∨	riii. Forms
☑ i	x. Fees
☑ x	. Is the state a National Fingerprint File (NFF) state?
	ti. Is the state a National Crime Prevention and Privacy Compact State?
☑ x	ii. Direct URL/website link to where this information is posted.
Ente	er direct URL/website link:
https	s://dss.mo.gov/cd/child-care/child-care-providers/background-screening.htm

b. Interstate Sex Offender Registry (SOR) Check:

☑ i. Agency Name

☑ ii. Address

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☑ iii. Phone Number
☑ iv. Email
□ v. FAX
✓ vi. Website
vii. Instructions ((e.g. Does a portal/system account need to be created to make a request? What types of identification are needed? What types of payment is accepted? How can a provider appeal the results? How will forms will be accepted and FAQs?)
✓ viii Forms
ix. Fees
☑ Direct URL/website link to where this information is posted.
Enter direct URL/website link:
https://www.mshp.dps.missouri.gov/MSHPWeb/PatrolDivisions/CRID/crimRecChk.htm
$oldsymbol{1}$
c. Interstate Child Abuse and Neglect (CAN) Registry Check:
☑ i. Agency Name
☑ ii. Is the CAN check conducted through a County Administered Registry or Centralized Registry?
☑ iii. Address
☑ iv. Phone Number
v. Email
vi. FAX
☑ vii. Website
viii. Instructions ((e.g. Does a portal/system account need to be created to make a request? What types of identification is needed? What types of payment is accepted? How can a provider appeal the results? How will forms will be accepted and FAQs?)
☐ ix. Forms
x. Fees

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xi. Description of information that may be included in a response to a CAN registry check (including substantiated instances of child abuse and neglect accompanied by the State's definition of "substantiated" instances of child abuse and neglect.

xii. Direct URL/website link to where this information is posted.

Enter direct URL/website link:

The CA/N Request form can be found at:

http://www.mshp.dps.missouri.gov/MSHPWeb/PatrolDivisions/CRID/documents/821-0353s11-18.pdf

5.5.7 Child care staff members cannot be employed by a child care provider receiving CCDF subsidy funds if they refuse a background check, make materially false statements in connection with the background check, or are registered or required to be registered on the state or National Sex Offender Registry (98.43 (c)(1)(i-iii)). Potential staff members also cannot be employed by a provider receiving CCDF funds if they have been convicted of: a felony consisting of murder, child abuse or neglect, crimes against children, spousal abuse, crimes involving rape or sexual assault, kidnapping, arson, physical assault or battery, or - subject to an individual review (at the state/territory's option) - a drug-related offense committed during the preceding 5 years; a violent misdemeanor committed as an adult against a child, including the following crimes - child abuse, child endangerment, or sexual assault; or a misdemeanor involving child pornography (98.43(c)(1)(iv-v)).

	y disqualify child care staff members based on their conviction specifically listed in 98.43(c)(i)?
□ No	
Yes.	
If yes, describe oth	er disqualifying crimes and provide the citation:
Additional disqualif	ying crimes, as per Missouri statute (§ 210.1080.4(5) (a)-(k),
RSMo) include any	additional felony offenses against the person; any other offen
against the person	involving the endangerment of a child; any additional
misdemeanor or fe	lony for a sexual offense; any additional misdemeanor or felon
for an offense agai	nst the family; burglary in the first degree; any misdemeanor of

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felony for robbery; any misdemeanor or felony for pornography or related offense; any felony for armed criminal action, unlawful use of a weapon, unlawful possession of a firearm, or unlawful possession of an explosive; or any felony for making a terrorist threat.

b. Describe how the Lead Agency notifies the applicant about their eligibility to work in a child care program. This description should detail how the Lead Agency ensures the privacy of background checks. Note: The Lead Agency may not publicly release the results of individual background checks. (98.43(e)(2)(iii)).

Notice is sent to applicant through regular mail if eligible for employment. If applicant is found ineligible, a notice stating which record had the disqualification is sent to the person through certified mail. The notices do not contain any confidential information.

c. Describe whether the state/territory has a review process for individuals disqualified due to a felony drug offense to determine if that individual is still eligible for employment (98.43 (e)(2-4).

If an individual was previously determined ineligible due to a drug related felony in the past five years, they are required to complete the comprehensive criminal background check from the beginning (See section 5.5.2). The Lead Agency's Background Screening Unit will review the information. If it has been over five years and there are no new disqualifying offenses, the individual receives an eligible letter.

5.5.8 Appeals Processes for Background Checks

States and territories shall provide for a process by which a child care program staff member (including a prospective child care staff member) may appeal the results of a background check to challenge the accuracy or completeness of the information contained in a staff member's background report. The state or territory shall ensure that:

- -- The child care staff member is provided with information related to each disqualifying crime in a report, along with information/notice on the opportunity to appeal
- -- A child care staff member will receive clear instructions about how to complete the appeals

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process for each background check component if the child care staff member wishes to challenge the accuracy or completeness of the information contained in such member's background report

- -- If the staff member files an appeal, the state or territory will attempt to verify the accuracy of the information challenged by the child care staff member, including making an effort to locate any missing disposition information related to the disqualifying crime
- -- The appeals process is completed in a timely manner for any appealing child care staff member
- -- Each child care staff member shall receive written notice of the decision. In the case of a negative determination, the decision should indicate 1) the state's efforts to verify the accuracy of information challenged by the child care staff member, 2) any additional appeals rights available to the child care staff member, and 3) information on how the individual can correct the federal or state records at issue in the case. (98.43(e)(3))
- -- The Lead Agency must work with other agencies that are in charge of background check information and results (such as the Child Welfare office and the State Identification Bureau), to ensure the appeals process is conducted in accordance with the Act.
 - a. What is the procedure for each applicant to appeal or challenge the accuracy or completeness of the information contained in the background check report? If there are different appeal process procedures for each component of the check, please provide that in this description, including information on which state agency is responsible for handling each type of appeal. Note: The FBI Fingerprint Check, State Criminal Fingerprint, and NCIC NSOR checks are usually conducted by a state's Identification Bureau and may have different appeal processes than agencies that conduct the state CAN and state SOR checks.

Within 10 days of the date of the ineligible letter, an individual may appeal in writing to the Lead Agency to challenge the accuracy or completeness of the information contained in their comprehensive criminal background check. For some offenses, an individual may also appeal and offer information mitigating the results and explaining why an exception should be granted.

b. If the appeals process is different for interstate checks, what is the procedure for each applicant to appeal or challenge the accuracy or completeness of the information contained in the background report for interstate checks?

If an individual is questioning the accuracy or completeness of the information that was

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provided by another state, the individual is responsible for contacting that state. If the Lead Agency's Background Screening Unit receives information from that state that it was in fact a mistake, a permanent eligible letter is issued to the individual. If the Lead Agency's Background Screening Unit does not receive notification that it was a mistake, then the individual remains ineligible to work or be present in a child care setting.

c. Interstate Child Abuse and Neglect (CAN) Registry Check:

If an individual is questioning the accuracy or completeness of the information that was provided by another state, the individual would be responsible for contacting that state. If the Lead Agency's Background Screening Unit receives information from that state that is was in fact a mistake, a permanent eligible letter is issued to the individual. If the Lead Agency's Background Screening Unit does not receive notification that it was a mistake, then the individual remains ineligible to work or be present in a child care setting.

5.6 Exemptions for Relative Providers

States and territories have the option to exempt relatives (defined in CCDF regulations as grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles (98.42(c)) from certain health and safety requirements. Note: This exception applies if the individual cares only for relative children.

Check and describe where applicable the policies that the Lead Agency has regarding exemptions for eligible relative providers for the following health and safety requirements. The description should include the health and safety requirements relatives are exempt from, if applicable, as well as which of the federally defined relatives the exemption applies to.

5.6.1 Licensing Requirements (as described in Section 5.1)

a.	Relative p	roviders	are exem	pt from a	all licensi	ng requirem	ents.	
☑ b.	Relative p	roviders	are exem	pt from a	a portion	of licensing	requiremen	nts

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Describe:
In home child care providers who care for six or fewer children or more than three children under the age of two are exempt from licensing requirements. These
providers must follow the regulations in 13 CSR 35-32 which can be found at:
https://www.sos.mo.gov/cmsimages/adrules/csr/current/13csr/13c35-32.pdf.
c. Relative providers must fully comply with all licensing requirements.
5.6.2 Health and Safety Standards (as described in Section 5.2 and 5.3)
a. Relative providers are exempt from all health and safety standard requirements
b. Relative providers are exempt from a portion of health and safety standard requirements. Describe:
Document.
c. Relative providers must fully comply with all health and safety standard requirements.
5.6.3 Health and Safety Training (as described in Section 5.3)
a. Relative providers are exempt from all health and safety training requirements.
b. Relative providers are exempt from a portion of all health and safety training requirements.
Describe:
c. Relative providers must fully comply with all health and safety training requirements.
5.6.4 Monitoring and Enforcement (as described in Section 5.4)
a. Relative providers are exempt from all monitoring and enforcement requirements.

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b. Relative providers are exempt from a portion of monitoring and enforcement requirements.	t
Describe:	
c. Relative providers must fully comply with all monitoring and enforcement requirements.	
5.6.5 Background Checks (as described in Section 5.5)	
a. Relative providers are exempt from all background check requirements.	
b. Relative providers are exempt from a portion of background check requirements. If checked, identify the background check components that relating must complete:	tives
i. Criminal registry or repository using fingerprints in the current state of residency	
ii. Sex offender registry or repository in the current state of residency	
iii. Child abuse and neglect registry and database check in the current state of residency	
iv. FBI fingerprint check	
v. National Crime Information Center (NCIC) National Sex Offender Registr (NSOR) name based search.	у
vi. Criminal registry or repository in any other state where the individual has resided in the past five years.	
vii. Sex offender registry or repository in any other state where the individual has resided in the past five years.	
viii. Child abuse and neglect registry or data base in any other state where the individual has resided in the past five years.	
c. Relative providers must fully comply with all background check requirements	S

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This section covers the state or territory framework for training, professional development, and post-secondary education (98.44(a)); provides a description of strategies used to strengthen the business practices of child care providers (98.16(z)); and addresses early learning and developmental guidelines.

Lead Agencies are required to reserve and use a portion of their Child Care and Development Fund program expenditures for activities designed to improve the quality of child care services and to increase parental options for and access to high-quality child care (98.53). This section addresses the quality improvement activities implemented by the Lead Agency related to the support of the child care workforce and the development and implementation of early learning and developmental guidelines. It asks Lead Agencies to describe the measurable indicators of progress used to evaluate state/territory progress in improving the quality of child care services. (98.53 (f)) in either of these two areas.

States and territories are required to describe their framework for training, professional development, and post-secondary education for caregivers, teachers, and directors, including those working in school-age care (98.44(a)). This framework is part of a broader systematic approach building on health and safety training (as described in section 5) within a state/territory. States and territories must incorporate their knowledge and application of health and safety standards, early learning guidelines, responses to challenging behavior, and the engagement of families. States and territories are required to establish a progression of professional development opportunities to improve the knowledge and skills of CCDF providers (658E(c)(2)(G)). To the extent practicable, professional development should be appropriate to work with a population of children of different ages, English-language learners, children with disabilities, and Native Americans (98.44(b)(2)(iv)). Training and professional development is one of the options that states and territories have for investing their CCDF quality funds (658G(b)(1)).

6.1 Professional Development Framework

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- 6.1.1 Each state or territory must describe their professional development framework for training, professional development, and post-secondary education for caregivers, teachers and directors in programs that serve children of all ages. This framework should be developed in consultation with the State Advisory Council on Early Childhood Education and Care or similar coordinating body. The framework should include these components: (1) professional standards and competencies, (2) career pathways, (3) advisory structures, (4) articulation, (5) workforce information, and (6) financing (98.44(a)(3)). Flexibility is provided on the strategies, breadth, and depth with which states and territories will develop and implement their framework.
 - a) Describe how the state/territory's framework for training and professional development addresses the following required elements:
 - i. State/territory professional standards and competencies. Describe:

Professional Development opportunities must meet one of the Core Competencies for Early Childhood and Youth Development Professionals (Kansas and Missouri). The eight content areas of competence are Child and Youth Growth and Development, Learning Environment and Curriculum, Observation and Assessment, Families and Communities, Health and Safety, Interactions with Children and Youth, Program Planning and Development, and Professional Development and Leadership. The Core Competencies are cumulative to grow with early care and education professionals as they progress through their career. The levels begin with entry level individuals with little to no background knowledge and build upon one another as professionals gain knowledge and skills through work experience, training and formal education. A copy of the Core Competencies are available at:

https://health.mo.gov/safety/childcare/pdf/corecompetencies.pdf.

ii. Career pathways. Describe:

In licensed child care, there are two components that are required to become a director of a group child care home or child care center which are specific child-related college credit and general college credit. Child care staff members who work directly with children in licensed programs are able to use full-time work experience to supplant general college credit in the attainment of director certification while obtaining required child related college credits.

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iii. Advisory structure. Describe:

One advisory structure is the Missouri Early Childhood Workforce Advisory Council.

Nineteen members on the Missouri Early Childhood Workforce Advisory Council represent the following: state departments that serve young children; colleges and universities that offer degrees related to early childhood; member associations representing the early childhood workforce; not-for-profit organizations that provide support to early childhood; organizations that directly serve children and families from diverse groups. Another advisory structure is the Higher Education Task Force.

Membership in the task force includes 21 faculty leaders from colleges and universities in Missouri that offer degrees in early childhood or child development.

iv. Articulation. Describe:

Articulation agreements are negotiated between individual institutions of higher education.

v. Workforce information. Describe:

The Missouri Professional Development Registry system collects key data about child care providers, which allows the Lead Agency to track employment, professional development, and education levels obtained by the provider. Based on the education completed, the provider will see where they fall on the educational matrix, which can inform the action needed to advance to the next step. The Lead Agency is in the process of acquiring an updated Registry that will combine the features of a Registry and Workshop Calendar into a single system for increased efficiency and improved access for a variety of professionals in the early childhood and afterschool system (e.g., child care providers, home visitors, parent educators) to be able to access high-quality training opportunities. The Lead Agency will work with the MASN as part of the 2021-22 workforce activities with the Preschool Development Grant Birth to Five (PDG B-5), the Early Childhood Workforce Advisory Council, as well as the Higher Education Task Force on issues impacting the broad range of child care programs. The Early Childhood Workforce Advisory Council and the Higher Education Task Force completed the following activities in 2020 to strengthen the workforce: (1) reviewed Missouri's workforce system strengths, professional development registry, Power to the Profession, credentials and certifications, and data on teacher degree programs; (2) discussed compensation including minimum wage legislation, living wage, pay inequities, compensation parity, classification systems, and lack of public value for early childhood

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services, entry pathways, career pathways, shared competencies, and bilingual training; and (3) brainstormed issues related to recruitment into the field, professional development, the fragmented system, advancement pathways, perception as a profession, training opportunities, undereducated workforce, and redundancy in training requirements.

vi. Financing. Describe:

The Lead Agency ensures a portion of the CCDF funds are used to develop and disseminate training at no cost to the provider. In addition, through the PDG B-5 funding opportunity, the Lead Agency is funding opportunities that promote training topics and activities that target multiple programs in the early care and education (ECE) system, such as child care, home visiting, parent education, and preschool. For example, in 2020 the Lead Agency provided trainings on trauma-informed practices to over 2,200 providers in the ECE system, and trainings on developmental milestones to over 300 providers. These trainings will continue in 2021 and 2022, in addition to additional topics on child development, early learning standards, screening tools, kindergarten entry assessments, with the goal of providing these trainings at no cost to the provider. As part of the sustainability plan for training and professional development after the grant concludes, the Lead Agency is developing a plan that will support more in-person and online, ondemand training opportunities for providers across early childhood and afterschool programs that will include not only more training topics, but increased access to training, at reduced cost or no charge, and at difficulty levels that consider the professionals' level of experience (e.g., introductory, veteran).

- b) The following are optional elements, or elements that should be implemented to the extent practicable, in the training and professional development framework.
 - i. Continuing education unit trainings and credit-bearing professional development to the extent practicable

Describe:

The Lead Agency hosts an annual conference for early childhood professionals, Conference on the Young Years, and professionals are able to obtain continuing education units (CEU's) upon successful completion of sessions. Additionally, the Lead Agency contracts with CCAMO to provide scholarship opportunities for CDA credentialing and college credit through T.E.A.C.H. scholarships. Using COVID-19 relief

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funding, both of these programs have been expanded to allow more opportunities for child care programs.

☑ ii. Engagement of training and professional development providers, including higher education, in aligning training and educational opportunities with the state/territory's framework

Describe:

The Lead Agency was awarded the PDG B-5 and in the initial grant year, the Lead Agency brought together two groups of leaders in Missouri's early childhood system: The Workforce Advisory Council and the Higher Education Task Force. The 19-member Missouri Early Childhood Workforce Advisory Council is a group of leaders from: State departments that serve young children; Colleges and universities that offer degrees related to early childhood; Member associations representing the early childhood workforce; Not-for-profit organizations that provide support to early childhood; and Organizations that directly serve children and families from diverse groups. The Higher Education Task Force comprises of 21 faculty leaders from colleges and universities in Missouri that offer degrees in early childhood or child development make up the task force. Both groups shared suggestions back and forth in a free flow of ideas to improve the early childhood workforce. They worked to understand the current status of the workforce, identify resources and needs, and create career pathways. This work is continuing in 2021-22 because Missouri received a national funding opportunity through the Zero to Three Building Strong Foundations for Families (ZTT BSFF) project. Through a partnership between staff involved in both PDG B-5 and ZTT BSFF, shared strategies are under development for strengthening the early childhood workforce and reimagining stakeholder engagement in the early childhood system, with support from national technical assistance specialists supported by both grants. Preliminary activities include aligning Missouri's early childhood structure to the National Association for the Education of Young Children (NAEYC) Power to the Profession and focus groups with a diverse group of stakeholders to identify ways to create and sustain meaningful stakeholder engagement activities.

□ii	i. (Oth	nei
Desc	cri	be:	

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6.1.2 Describe how the state/territory developed its professional development framework in consultation with the State Advisory Council on Early Childhood Education and Care (if applicable) or similar coordinating body if there is no SAC that addresses the professional development, training, and education of child care providers and staff.

A professional development framework was created through collaboration with key stakeholders including representatives of related state agencies, staff from the resource and referral network, the registry, afterschool network, child care providers, and head start providers. Subsequently, CCDF training requirements were developed in consultation with the DHSS SCCR and the MASN. The Social-Emotional and Behavioral Health training was developed in coordination with the CBEC Mental Health Workgroup and the MASN.

6.1.3 Describe how the framework improves the quality, diversity, stability, and retention of caregivers, teachers, and directors (98.44(a)(7)).

The Lead Agency provides financial assistance to individuals employed in a licensed childcare setting or to individuals who are registered providers via a contract with a statewide vendor to obtain a CDA. The framework can be used to inform decisions as professionals develop their individual professional development plans. By taking a strategic direction with professional development, individuals and programs can make measurable steps toward staff improvement and quality services for children. Using COVID-19 relief funding, the Lead Agency is contracting with a vendor to assist afterschool care providers in the attainment of a Youth Development Credential (YDC).

6.2 Training and Professional Development Requirements

The Lead Agency must describe how its established health and safety requirements for preservice or orientation training and ongoing professional development requirements--as described in Section 5 for caregivers, teachers, and directors in CCDF programs--align, to

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the extent practicable, with the state/territory professional development framework. These requirements must be designed to enable child care providers to promote the social, emotional, physical, and cognitive development of children and to improve the knowledge and skills of the child care workforce. Such requirements shall be applicable to child care providers caring for children receiving CCDF funds across the entire age span, from birth through age 12 (658E(c)(2)(G)). Ongoing training and professional development should be accessible and appropriate to the setting and age of the children served (98.44(b)(2)).

6.2.1 Describe how the state/territory incorporates into training and professional development opportunities:

- -- the knowledge and application of its early learning and developmental guidelines (where applicable);
- -- its health and safety standards (as described in section 5);
- -- and social-emotional/behavioral and mental health intervention models for young children, which can include positive behavior intervention and support models that reduce the likelihood of suspension and expulsion of children (as described in Section 2 of the Pre-Print) (98.44(b)).

The CCDF required trainings for Health and Safety are based on the health and safety standards and meet the state's core competencies for training. After the first year of required trainings, child care providers who receive CCDF funds, or work in programs that receive CCDF funds, are required to complete a minimum of six clock hours of training annually through the Missouri Workshop Calendar. Trainings must be completed during the provider's registration period and the provider's registration will not be renewed until the six hours of training are completed.

There are trainings available in the Missouri Workshop Calendar that address challenging behavior and social-emotional health. In addition, caregivers in licensed child care facilities are required to receive 12 clock hours of training approved by the Lead Agency from January 1 to December 31 of each year.

6.2.2 Describe how the state/territory's training and professional development are accessible to providers supported through Indian tribes or tribal organizations receiving CCDF funds (as applicable) (98.44(b)(2)(vi)).

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6.2.3 States/territories are required to facilitate participation of child care providers with limited English proficiency and disabilities in the subsidy system (98.16 (dd)). Describe how the state/territory will recruit and facilitate the participation of providers in the subsidy system:

a) with limited English proficiency

The Lead Agency participates in the DSS FSD's Refugee Resettlement program meetings and shares information about subsidy eligibility and processes for becoming a child care provider.

b) who have disabilities

The Lead Agency's outreach for recruiting child care providers does not focus on one particular population of individuals. In addition, the Lead Agency's online, on-demand trainings are ADA compliant and are equipped with closed captioning for hearing impaired and keyboard shortcut options for visually impaired.

6.2.4 Describe how the state/territory's training and professional development requirements are appropriate, to the extent practicable, for child care providers who care for children receiving child care subsidies, including children of different age groups (such as specialized credentials for providers who care for infants and/or school-age children); English-language learners; children with developmental delays and disabilities; and Native Americans, including Indians as defined in Section 4 of the Indian Self-Determination and Education Assistance Act (including Alaska Natives) and Native Hawaiians (98.44(b)(2)(iv)).

The Lead Agency has translation and interpretation services for primary and secondary languages through a contracted entity. Missouri's training and professional development requirements include the Core Competencies for Early Childhood and Youth Development Professionals (Kansas and Missouri). This is a framework that defines the standards for early

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childhood and youth development professionals. They set the expectations for professionals who care for infants, toddlers, preschoolers, school-age children, and older youth.

6.2.5 The Lead Agency must provide training and technical assistance (TA) to providers and appropriate Lead Agency (or designated entity) staff on identifying and serving children and families experiencing homelessness (658E(c)(3)(B)(i)).

a. Describe the state/territory's training and TA efforts for providers in identifying and serving homeless children and their families (relates to question 3.2.2).

The Lead Agency's contractors in the Educare program provide support group opportunities to network with other programs, in an educationally-enriched environment. Support group networking opportunities occur at least once per month and Identifying and Serving Homeless Children and Families is a required topic for at least one support group per year. In addition, the Missouri Workshop Calendar offers training opportunities that can be taken as part of a child care provider's annual training requirement. The Lead Agency also provides training to community partners who support families who are homeless. These trainings provide an overview of the Child Care Subsidy program and how to help the family apply for subsidies. These community partners are able to communicate quickly with a family advocate and send applications to the Lead Agency for expedited processing for these situations.

b. Describe the state/territory's training and TA efforts for Lead Agency (or designated entity) staff in identifying and serving children and their families experiencing homelessness (connects to question 3.3.6).

The Lead Agency's contractors in the Educare program provide outreach, technical support, and training to help with the identification and provision of services to families who are experiencing homelessness. The Lead Agency's homeless coordinator collaborates with state social service agencies through participation in the Special Education Advisory Panel and State Interagency Coordinating Council. These councils include members who are professionals working in the areas of health and mental health, preschool programs, community organizations, and other agencies. One of the goals of these councils is to improve the provision of comprehensive education and related services to homeless

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preschool-age children and their families. Additionally, the Lead Agency's homeless coordinator conducts at least two webinars each year and presents at a number of conferences (e.g., Governor's Council to End Homelessness, Continuum of Care, Federal Programs Conference, DHSS School Nurses Conference, National Association for the Education of Homeless Children and Youth Conference, and the Conference on the Young Years) in order to raise awareness on topics relevant to serving children and families experiencing homelessness.

6.2.6 Lead Agencies must develop and implement strategies to strengthen the business practices of child care providers to expand the supply and to improve the quality of child care services (98.16 (z)). Describe the state/territory's strategies to strengthen provider's business practices, which can include training and/or TA efforts.

a. Describe the strategies that the state/territory is developing and implementing for strengthening child care providersâ business practices.

Technical assistance is available to CCDF providers through Educare. Business Topics is one of the required topics for monthly support groups and can address areas such as: Keeping Records, How to Market Your Business, Management, Leadership, and Human Resources. Additionally, the Lead Agency is contracting with the Missouri Small Business Development Center (SBDC) to provide one-on-one counseling to business owners and directors to help support their finances. Additionally, online classes will be available to child care providers, directors, and owners on best practices. These services are free of charge and available across the entire state. Additionally, as part of PDG B-5 activities, the Lead Agency is conducting a pilot project in 2021 to support approximately 15 center directors/administrators as scholarship recipients in a Master's level leadership model as part of the continuum of opportunities for education and training through T.E.A.C.H. Missouri. This model will include learning sound business practices, how to deal with business situations quickly and in a manner that is likely to lead to a good outcome, (e.g., business acumen), improved financial performance, and leadership development. The Lead Agency will consider extending this opportunity to more child care providers using COVID-19 relief funding, if available.

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b. Check the topics addressed in the state/territory's strategies for strengthening child
care providersâ business practices. Check all that apply.
☑ i. Fiscal management
☑ ii. Budgeting
☑ iii. Recordkeeping
iv. Hiring, developing, and retaining qualified staff
□ v. Risk management
vi. Community relationships
☑ vii. Marketing and public relations
viii. Parent-provider communications, including who delivers the training, education, and/or technical assistance
ix. Other
Describe:

6.3 Supporting Training and Professional Development of the Child Care Workforce with CCDF Quality Funds

Lead Agencies can invest CCDF quality funds in the training, professional development, and post-secondary education of the child care workforce as part of a progression of professional development activities, such as those included at 98.44 of the CCDF Rule, and those included in the activities to improve the quality of child care also addressed in Section 7 (98.53(a)(1)).

- 6.3.1 Training and professional development of the child care workforce.
 - a. In the table below, describe which content is included in training and professional development activities and how an entity is funded to address this topic. Then identify which types of providers are included in these activities. Check all that apply.
 - i. Promoting the social, emotional, physical, and cognitive development of children, including those efforts related to nutrition and physical activity, using scientifically based, developmentally appropriate, and age-appropriate strategies (98.53 (a)(1)(i)(A)).

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Describe the content and funding:

To continue to meet CCDF requirements for Health and Safety Training and to improve professional development, the Lead Agency is contracting with a university or training network to develop online, on-demand interactive health and safety trainings that are aligned with the core competencies' increasing levels of aptitude. These activities are funded by CCDF.

Which type of providers are included in these training and professional development activities?

- Licensed center-based
- ☑ License exempt center-based
- Licensed family child care home
- ✓ License- exempt family child care home
- ✓ In-home care (care in the child's own home)

ii. Implementing behavior management strategies, including positive behavior interventions and support models that promote positive social-emotional development and the mental health of young children and that reduce challenging behaviors, including a reduction in expulsions of preschool-age children from birth to age five for such behaviors. (See also section 2.4.5.) (98.53(a)(1)(iii)).

Describe the content and funding:

Social-Emotional Development training is currently available on the Missouri Workshop Calendar. Additionally, in order to assist child care staff in meeting challenging behaviors, the Lead Agency provides child care centers with training in Trauma Smart, a training program designed to assist child care centers and schools in developing an environment where all of the adults in a child's life have the knowledge to address challenging behaviors. Parents, grandparents, teachers, administrators, school bus drivers, and ancillary school staff can all be prepared to spot the signs of trauma and help children cope and heal. Trauma Smart is an evidence-based intervention that is recognized by the U.S. Department of Health and Human Services and the National Child Traumatic Stress Network to be effective in helping children and the adults who care for them address the negative impact of violence and trauma. These activities are funded by CCDF.

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Which type of providers are included in these training and professional development activities?
☑ Licensed center-based
✓ License exempt center-based
☑ Licensed family child care home
☑ License- exempt family child care home
✓ In-home care (care in the child's own home)
iii. Engaging parents and families in culturally and linguistically appropriate ways to expand their knowledge, skills, and capacity to become meaningful partners in supporting their children's positive development. (98.53(a)(1)(iv)).
Describe the content and funding:
During PDG Year 1, the University of Missouri - Columbia Center for Excellence in Child Well-being (CFE) developed two video series on the importance of parent engagement both from the child care professional perspective and the parent's perspective. Within those videos and the MMM work outlined above, the CFE touched on the developmental domains, but more detail is necessary for parents and professionals. These activities are funded by PDG B-5.
Which type of providers are included in these training and professional development activities?
☑ Licensed center-based
License exempt center-based
Licensed family child care home
License- exempt family child care home
In-home care (care in the child's own home)
iv. Implementing developmentally appropriate, culturally and linguistically responsive instruction, and evidence-based curricula, and designing learning environments that are aligned with state/territory early learning and developmental standards (98.15 (a)(9)).

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Describe the content and funding:

N/A

Which type of providers are included in these training and professional development activities?
Licensed center-based
License exempt center-based
Licensed family child care home
License- exempt family child care home
In-home care (care in the child's own home)

v. Providing onsite or accessible comprehensive services for children and developing community partnerships that promote families' access to services that support their children's learning and development.

Describe the content and funding:

To build on the work completed in 2020 of the PDG B-5, the Lead Agency will continue to offer MMM training for early childhood professionals and incorporate lessons learned through feedback from the initial pilot sites. The training will provide options for implementing developmental monitoring within a child care or home visiting program; align with MMM Implementation Guide; align fully with the CDC "Learn the Signs. Act Early." Campaign; and provide information on how to support families to conduct developmental monitoring. These activities are funded by PDG B-5.

Which type of providers are included in these training and professional development activities?

- ✓ Licensed center-based
- License exempt center-based
- Licensed family child care home
- License- exempt family child care home
- In-home care (care in the child's own home)
- vi. Using data to guide program evaluation to ensure continuous improvement 98.53(a)(1)(ii)).

Describe the content and funding:

School Age Community (SAC) grantees funded through CCDF quality dollars participate annually in a Planning With Data training where they review site level data and create quality action plans to guide their continuous improvement efforts.

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Which type of providers are included in these training and professional development activities?
☑ Licensed center-based
☑ License exempt center-based
Licensed family child care home
License- exempt family child care home
In-home care (care in the child's own home)
vii. Caring for children of families in geographic areas with significant concentrations of poverty and unemployment.
Describe the content and funding:
N/A
Which type of providers are included in these training and professional development activities?
☐ Licensed center-based
License exempt center-based
Licensed family child care home
License- exempt family child care home
In-home care (care in the child's own home)
viii. Caring for and supporting the development of children with disabilities and developmental delays 98.53 (a)(1)(i)(B).
Describe the content and funding:
The Lead Agency is developing a set of video clips to be added to the
developmental milestone section of the Early Connection website at:
https://earlyconnections.mo.gov/families/development-milestone. These clips will
demonstrate mastery in the corresponding developmental milestones for children

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and disabilities. These activities are funded by PDG B-5.

ages birth to three years, including examples of typical and atypical development to help support parents and professionals in the identification of developmental delays Which type of providers are included in these training and professional development activities?

✓ Licensed center-based
✓ License exempt center-based
✓ Licensed family child care home
✓ License- exempt family child care home

ix. Supporting the positive development of school-age children (98.53(a)(1)(iii). Describe the content and funding:

In-home care (care in the child's own home)

The Lead Agency is a leadership member of the MASN, which provides trainings and professional development to before and afterschool settings. A MASN committee meets quarterly to discuss specific professional development needs for afterschool professionals. The committee is attempting to host small professional development trainings throughout the state each year to help staff get the required clock hours. Also, MASN hosts the Missouri School Age Community Coalition Professional Development Institute (MOSAC2 PDI), which is a professional development event held in the fall each year. This MOSAC2 PDI allows afterschool professionals to connect with other professionals and gain clock hours geared to specific afterschool trainings. These activities are funded by the Lead Agency, in addition to registration fees generated by MOSAC PDI events and MOTT, who provides funding for systems work and leadership team activities.

Which type of providers are included in these training and professional development activities?

✓ Licensed center-based
✓ License exempt center-based
✓ Licensed family child care home

✓ License- exempt family child care home

✓ In-home care (care in the child's own home)

x. Other

Describe:
N/A

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development activities?
Licensed center-based
License exempt center-based
Licensed family child care home
License- exempt family child care home
In-home care (care in the child's own home)
b. Check how the state/territory connects child care providers with available federal and state/territory financial aid or other resources to pursue post-secondary education relevant for the early childhood and school-age workforce and then identify which providers are eligible for this activity. Check all that apply.
i. Coaches, mentors, consultants, or other specialists available to support access to post-secondary training, including financial aid and academic
counseling.
Licensed center-based
License exempt center-based
Licensed family child care home
License- exempt family child care home
In-home care (care in the childâs own home)
☑ ii. Statewide or territory-wide, coordinated, and easily accessible clearinghouse (i.e., an online calendar, a listing of opportunities) of relevant post- secondary education opportunities.
✓ Licensed center-based
✓ License exempt center-based
✓ License exempt center-based✓ Licensed family child care home

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Y	iii. Financial awards such as scholarships, grants, loans, or reimbursement
	for expenses and/or training, from the state/territory to complete post-secondary
	education.
	☑ Licensed center-based
	☑ License exempt center-based
	☑ Licensed family child care home
	☑ License- exempt family child care home
	In-home care (care in the childas own home)
П	iv. Other.
	☐ Licensed center-based
	License exempt center-based
	Licensed family child care home
	License- exempt family child care home
	In-home care (care in the childas own home)
	Describe:

6.3.2 Describe the measurable indicators of progress relevant to subsection 6.3 that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures.

CCAMO provides quarterly reports on various metrics related to the number of child care providers and customer contacts. CCAMO is working to collect the number of current child care staff to enter into the CDA program and the number to complete the program to report to the Lead Agency. In addition, those who complete the CDA program will be tracked for two years post completion to determine if they continue to work in the field of early childhood. The number of individuals completing online, on-demand trainings is tracked annually. Trauma Smart has an evaluation component that measures 10 CLASS Domains. Results of this evaluation will determine whether to continue or expand the program in future years. Several measures are in place for SAC grantees including the number technical assistance visits, completion of quality action plans, attendance at Youth Work Methods trainings, onsite Program Quality Assessment (PQA), annual youth, family, staff, and school surveys.

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6.4 Early Learning and Developmental Guidelines

6.4.1 States and territories are required to develop, maintain, or implement early learning and developmental guidelines that are appropriate for children in a forward progression from birth to kindergarten entry (i.e., birth-to-three, three-to-five, birth-to-five), describing what children should know and be able to do and covering the essential domains of early childhood development. These early learning and developmental guidelines are to be used statewide and territory-wide by child care providers and in the development and implementation of training and professional development (658E(c)(2)(T)). The required essential domains for these guidelines are cognition, including language arts and mathematics; social, emotional, and physical development; and approaches toward learning (98.15(a)(9)). At the option of the state/territory, early learning and developmental guidelines for out-of-school time may be developed. Note: States and territories may use the quality set-aside, discussed in section 7, to improve on the development or implementation of early learning and developmental guidelines.

a. Describe how the state/territory's early learning and developmental guidelines address the following requirements:

i. Are research-based.

The Lead Agency's Missouri Early Learning Standards (MELS) are consistent with current research and recommendations from other state and national initiatives. The MELS are not a curriculum but a framework for communicating a shared set of expectations for children as they grow and develop. Some children will develop in accordance with these standards, and others will exceed them. It is important to recognize that children learn and develop in their own unique ways. While research demonstrates these standards are appropriate for most children, it is the responsibility of adults to assess and build on the strengths of each child.

ii. Developmentally appropriate.

The MELS are intended for all adults-teachers, caregivers, and/or parent educators-who work with infants, toddlers and preschool-age children, and their families. The guide is designed to provide an explanation of the standards and contains practical suggestions for creating engaging and developmentally appropriate learning communities where each child's development is fostered.

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iii. Culturally and linguistically appropriate.

N/A

iv. Aligned with kindergarten entry.

The Lead Agency is in the process of aligning the MELS and the kindergarten standards.

v. Appropriate for all children from birth to kindergarten entry.

The intent of the MELS is to provide guidance to early childhood professionals about the developmental sequence of learning for infants, toddlers, and preschool-age children. This document is meant to support professionals as they create developmentally-appropriate learning opportunities and environments for young children while preparing them for success in school and in life. This information can also help support professionals in their conversations with families.

vi. Implemented in consultation with the educational agency and the State Advisory Council or similar coordinating body.

The Lead Agency, along with a diverse group of individuals whose backgrounds are representative of the state's advisory council and early childhood community in Missouri, developed these standards for what most children should know and be able to do by the time they enter kindergarten.

b. Describe how the required domains are included in the state/territory's early learning and developmental guidelines. Responses for "other" are optional.

i. Cognition, including language arts and mathematics.

The MELS include Language and Literacy, Mathematics, and Science in the Cognition Domain as distinct sections.

ii. Social development.

The MELS include a distinct section for social and emotional development.

iii. Emotional development.

The MELS include a distinct section for social and emotional development.

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iv. Physical development.

Physical development, including health and safety practices, are included in a distinct section of the MELS.

v. Approaches toward learning.

Approaches to learning is included in a distinct section of the MELS.

vi. Describe how other optional domains are included, if any:

N/A

c. Describe how the state/territory's early learning and developmental guidelines are updated and include the date first issued and/or the frequency of updates.

The MELS were originally developed from 2001 to 2005 by a group of individuals whose backgrounds are representative of the early childhood community in Missouri, including classroom teachers, child care providers, parent educators, content experts, higher education faculty, and state and partner agency staff. The MELS were updated in 2013 to include standards for infants and toddlers, and again in 2021 to include examples and activities to provide further clarification.

d. If applicable, discuss the state process for the adoption, implementation, and continued improvement of state out-of-school time standards.

The Lead Agency partners with the MASN and collaborates on developing specific trainings for out of school time staff. The Lead Agency also works with the out of school time partners, Area Resources for Community & Human Services (ARCHS) and Local Investment Commission (LINC), to provide out of school time support for families in low income urban areas.

e. Provide the Web link to the state/territory's early learning and developmental guidelines and if available, the school-age guidelines.

https://dese.mo.gov/early-extended-learning/early-learning/Missouri-early-learning-standards

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6.4.2 CCDF funds cannot be used to develop or implement an assessment for children that:

- -- Will be the primary or sole basis to determine a child care provider ineligible to participate in the CCDF,
- -- Will be used as the primary or sole basis to provide a reward or sanction for an individual provider,
- -- Will be used as the primary or sole method for assessing program effectiveness,
- -- Will be used to deny children eligibility to participate in the CCDF (658E(c)(2)(T)(ii)(I); 98.15(a)(2)).

Describe how the state/territory's early learning and developmental guidelines are used.

The Lead Agency is developing training for the revised MELS, which will be disseminated by December 2021. The introductory training about the content and how to use the MELS will be available statewide.

6.4.3 If quality funds are used to develop, maintain, or implement early learning and development guidelines, describe the measurable indicators that will be used to evaluate the state/territory's progress in improving the quality of child care programs and services and the data on the extent to which the state/territory has met these measures (98.53(f)(3)).

N/A

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7 Support Continuous Quality Improvement

Lead Agencies are required to use a portion of their CCDF program expenditures for activities designed to improve the quality of child care services and to increase parental options for and access to high-quality child care (98.53). The quality activities should be aligned with a statewide or territory-wide assessment of the state's or territory's need to carry out such services and care. States and territories are required to report on these quality improvement investments through CCDF in three ways:

- 1. In the CCDF Plan, the ACF 118, states and territories will describe the types of activities supported by quality investments over the 3-year period (658G(b); 98.16(j)).
- 2. In the annual expenditure report, the ACF-696, ACF will collect data on how much CCDF funding is spent on quality activities. This report will be used to determine compliance with the required quality and infant and toddler spending requirements (658G(d)(1); 98.53(f)).
- 3. For each year of the Plan period, states and territories will submit a Quality Progress Report, the ACF 218, that will include a description of activities funded by quality expenditures and the measures used by the state/territory to evaluate its progress in improving the quality of child care programs and services within the state/territory (658G(d); 98.53(f)).

States and territories must fund efforts in at least one of the following 10 activities:

- Supporting the training and professional development of the child care workforce (Addressed in Section 6)
- Improving on the development or implementation of early learning and developmental guidelines (Addressed in Section 6)
- Developing, implementing, or enhancing a tiered quality rating and improvement system or other systems of quality improvement for child care providers and services
- Improving the supply and quality of child care programs and services for infants and toddlers
- Establishing or expanding a statewide system of child care resource and referral services
- Supporting compliance with state/territory requirements for licensing, inspection, monitoring,

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training, and health and safety (as described in section 5)

- Evaluating the quality of child care programs in the state/territory, including evaluating how programs positively impact children
- Supporting providers in the voluntary pursuit of accreditation
- Supporting the development or adoption of high-quality program standards related to health, mental health, nutrition, physical activity, and physical development
- Performing other activities to improve the quality of child care services, as long as outcome measures relating to improved provider preparedness, child safety, child well-being, or kindergarten entry are possible.

Throughout this Plan, states and territories will describe the types of quality improvement activities where CCDF investments are being made, including but not limited to, quality set-aside funds, and will describe the measurable indicators of progress used to evaluate state/territory progress in improving the quality of child care services for each expenditure (98.53(f)). These activities can benefit infants and toddlers through school-age populations, and all categories of care. It is important that while Lead Agencies have the flexibility to define "high quality" and develop strategies and standards to support their definition, Lead Agencies should consider how that definition and those strategies for different provider types reflect and acknowledge their unique differences and how quality varies in different settings, including family child care and small care settings as well as child care centers.

This section covers the quality activities needs assessment, quality improvement activities, and indicators of progress for each of the activities undertaken in the state or territory.

7.1 Quality Activities Needs Assessment for Child Care Services

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7.1.1 Lead Agencies must invest in quality activities based on an assessment of the state/territory's needs to carry out those activities. Lead Agencies have the flexibility to design an assessment of their quality activities that best meet their needs, including how often they do the assessment. Describe your state/territory assessment process, including the frequency of assessment (658G(a)(1); 98.53(a)).

Multiple programs that are part of Missouri's early childhood and afterschool system conduct a needs assessments on a regular basis, including the PDG B-5, the Maternal,Infant, and Early Childhood Home Visiting (MIECHV), Head Start, Preschool Programs, and Part C/First Steps Early Intervention. These programs are required, or strongly encouraged as best practice, to conduct an assessment, at a minimum, every three years, which is consistent with the Lead Agency's guidance for conducting needs assessments. In addition, the MASN completes a comprehensive strategic planning process every three years, which includes a needs assessment component.

7.1.2 Describe the findings of the assessment and if any overarching goals for quality improvement were identified. If applicable, include a direct URL/website link for any available evaluation or research related to the findings.

Assessment activities from the past two years, including interviews and focus groups with stakeholders, indicated the system is fragmented due to being delivered by multiple state agencies and this fragmentation results in confusion, duplication of effort, needless administrative barriers for providers, and inconsistent quality and access to services for children and families. Ultimately, this lack of coordination has resulted in diminished outcomes for Missouri's youngest children, which has impacts for all Missourians. In response to stakeholder and program needs, Missouri's Governor signed an Executive Order in January 2021 to move nearly all early childhood and afterschool programs in DESE, DSS, and DHSS into a single Office of Childhood housed at DESE. The new office will be in effective on August 28, 2021. The Lead Agency and other state agency partners are in the process of reviewing numerous contracts, policies, procedures, and processes related to the programs under the new Office of Childhood. The Lead Agency's website with more information about this new office is at: https://earlyconnections.mo.gov/who-we-are/new-office-childhood.

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7.2 Use of Quality Funds

7.2.1 Check the quality improvement activities in which the state/territory is investing

V	a. Supporting the training and professional development of the child care workforce as discussed in 6.2 (Related Section: 6.3). Check all that apply.
	i CCDF funds
	☑ ii. State general funds
	Other funds. Describe:
	Missouri combines funds from CCDF Discretionary, General Revenue, and funds from
	the state set aside Early Childhood Development Education and Care (ECDEC), as
	well as Title V Maternal and Child Health Block Grant.
V	b. Developing, maintaining, or implementing early learning and developmental guidelines (Related Section: 6.4). Check all that apply.
	i CCDF funds
	☑ ii. State general funds
	Other funds. Describe:
	Preschool Development Grant Birth to Five.
V	c. Developing, implementing, or enhancing a tiered quality rating and improvement system (Related Section: 7.3). Check all that apply.
	i CCDF funds
	☑ ii. State general funds
	Other funds. Describe:
	Preschool Development Grant Birth to Five.
V	d. Improving the supply and quality of child care services for infants and toddlers (Related Section: 7.4). Check all that apply.

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	Other funds. Describe:
	Missouri combines funds from CCDF Discretionary, General Revenue, and funds from
	the state set aside Early Childhood Development Education and Care (ECDEC).
V	e. Establishing or expanding a statewide system of CCR&R services, as discussed
	in 1.7 (Related Section: 7.5). Check all that apply.
	i CCDF funds
	☑ ii. State general funds
	Other funds. Describe:
	Missouri combines funds from CCDF Discretionary, General Revenue, and funds from
	the state set aside Early Childhood Development Education and Care (ECDEC), as
	well as Preschool Development Grant Birth to Five.
	f Facilitating Compliance with State Standards (Boletad Section, 7.6). Check
	f. Facilitating Compliance with State Standards (Related Section: 7.6). Check all that apply.
	☑ i CCDF funds
	☑ ii. State general funds
	Other funds. Describe:
	Missouri combines funds from CCDF Discretionary, General Revenue, and funds from
	the state set aside Early Childhood Development Education and Care (ECDEC).
V	g. Evaluating and assessing the quality and effectiveness of child care
	services within the state/territory (Related Section: 7.7). Check all that apply.
	i CCDF funds
	☑ ii. State general funds
	Other funds. Describe:
	Preschool Development Grant Birth to Five.
	h. Accreditation Support (Related Section: 7.8). Check all that apply.
	☑ i CCDF funds
	ii. State general funds
	Other funds. Describe:

☑ i CCDF funds

☑ ii. State general funds

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i. Supporting state/territory or local efforts to develop high-quality program standards relating to health, mental health, nutrition, physical activity, and physical development (Related Section: 7.9). Check all that apply.
i CCDF funds
ii. State general funds
Other funds. Describe:
j. Other activities determined by the state/territory to improve the quality of child care services and which measurement of outcomes related to improved provider preparedness, child safety, child well-being, or kindergarten entry is possible (Related Section: 7.10). Check all that apply
i CCDF funds
☑ ii. State general funds
Other funds. Describe:
Preschool Development Grant Birth to Five.

7.3 Quality Rating and Improvement System (QRIS) or Another System of Quality Improvement

Lead Agencies may respond in this section based on other systems of quality improvement, even if not called a QRIS, as long as the other quality improvement system contains the elements of a QRIS. QRIS refers to a systematic framework for evaluating, improving and communicating the level of quality in early childhood programs and contains five key elements:

- 1. Program standards
- 2. Supports to programs to improve quality
- 3. Financial incentives and supports
- 4. Quality assurance and monitoring
- 5. Outreach and consumer education

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7.3.1 Does your state/territory have a quality rating and improvement system or other system of quality improvement?		
a. No, the state/territory has no plans for QRIS development. If no, skip to 7.4.1.		
b. No, but the state/territory is in the QRIS development phase. If no, skip to 7.4.1.		
c. Yes, the state/territory has a QRIS operating statewide or territory-wide.		
Describe how the QRIS is administered (e.g., statewide or locally or through CCR&F		
entities) and any partners, and provide a link, if available.		
d. Yes, the state/territory has a QRIS initiative operating as a pilot-test in a few localities or only a few levels but does not have a fully operating initiative on a statewide or territory-wide basis.		
Provide a link, if available.		
e. Yes, the state/territory has another system of quality improvement.		
Describe the other system of quality improvement and provide a link, if available.		
7.3.2 Indicate how providers participate in the state or territory QRIS or another system of quality improvement.		
a. Are providers required to participate in the QRIS or another system of quality improvement? Check all that apply if response differs for different categories of care.		
Participation is voluntary		
Participation is partially mandatory. For example, participation is mandatory for providers serving children receiving a subsidy, participation is mandatory for all licensed providers or participation is mandatory for programs serving children birth to age 5 receiving a subsidy. If checked, describe the relationship between QRIS participation and subsidy (e.g., minimum rating required, reimbursed at higher rates for achieving higher ratings, participation at any level).		

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Participation is required for all providers.
b. Which types of settings or distinctive approaches to early childhood education and care participate in the state/territory QRIS or another system of quality improvement? Check all that apply.
☐ i. Licensed child care centers
ii. Licensed family child care homes
iii. License-exempt providers
☐ iv. Early Head Start programs
□ v. Head Start programs
☐ vi. State Prekindergarten or preschool programs
vii. Local district-supported Prekindergarten programs
viii. Programs serving infants and toddlers
ix. Programs serving school-age children
x. Faith-based settings
xi. Tribally operated programs
xii. Other
Describe:

c. Describe how the Lead Agency's QRIS, or other system for improving quality, considers how quality may look different in the different types of provider settings which participate in the QRIS or other system of quality improvement. For instance, does the system of quality improvement consider what quality looks like in a family child care home with mixed-age groups vs. child care centers with separate age groups? Or are standards related to quality environments flexible enough to define quality in home-based environments, as well as child care center environments?

7.3.3 Identify how the state or territory supports and assesses the quality of child care providers.

The Lead Agency may invest in the development, implementation, or enhancement of a tiered

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quality rating and improvement system for child care providers and services or another system of quality improvement. Note: If a Lead Agency decides to invest CCDF quality dollars in a QRIS, that agency can use the funding to assist in meeting consumer education requirements (98.33).

Do the state/territory's the following standard	quality improvement standards align with or have reciprocity with any of s?
□ No	
	check the type of alignment, if any, between the state/territory's lards and other standards. Check all that apply.
or part of same, the	ms that meet state/territory PreK standards are able to meet all the quality improvement standards (e.g., content of the standards is the ere is a reciprocal agreement between PreK programs and the quality nent system).
able to m standards	ms that meet federal Head Start Program Performance Standards are eet all or part of the quality improvement standards (e.g., content of the is is the same, there is a reciprocal agreement between Head Start and the quality improvement system).
or part of	ms that meet national accreditation standards are able to meet all the quality improvement standards (e.g., content of the standards is the alternative pathway exists to meeting the standards).
d. Progra standards	ms that meet all or part of state/territory school-age quality
e. Other.	
Describe:	
other regulatory requ	ritory's quality standards build on its licensing requirements and irrements?
□ No	
	check any links between the state/territory's quality standards g requirements
	es that a provider meet basic licensing requirements to qualify se level of the QRIS.

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L b. Embed	is licensing into the QRIS
C. State/te	erritory license is a "rated" license
d.Other.	
Describe:	
	territory provide financial incentives and other supports designed to
expand the full diver	sity of child care options and help child care providers improve the
quality of services th	at are provided through the QRIS or another system of quality
improvement.	
□ No	
-	check all that apply
	and an unat apply
a. If yes, indi	cate in the table below which categories of care receive this support.
i. One-time g	rants, awards, or bonuses
Licens	ed center-based
Licens	e exempt center-based
Licens	ed family child care home
Licens	e- exempt family child care home
☐ In-hom	ne (care in the child's own home)
-	r periodic quality stipends
Licens	ed center-based
Licens	e exempt center-based
Licens	ed family child care home
Licens	e- exempt family child care home
☐ In-hom	ne (care in the child's own home)
iii. Higher sul	osidy payments
Licens	ed center-based
Licens	e exempt center-based
Licens	ed family child care home

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License- exempt family child care home	
In-home (care in the child's own home)	
iv. Training or technical assistance related to QRIS	
Licensed center-based	
License exempt center-based	
Licensed family child care home	
License- exempt family child care home	
In-home (care in the child's own home)	
v. Coaching/mentoring	
Licensed center-based	
License exempt center-based	
Licensed family child care home	
License- exempt family child care home	
In-home (care in the child's own home)	
vi. Cabalarahina, hanyaga ar ingrangad gampanagtian for dagrang/agrt	ficator.
vi. Scholarships, bonuses, or increased compensation for degrees/certification and a sector based	ncates
Licensed center-based	
License exempt center-based	
Licensed family child care home	
License- exempt family child care home	
In-home (care in the child's own home)	
vii. Materials and supplies	
☐ Licensed center-based	
License exempt center-based	
Licensed family child care home	
License- exempt family child care home	
In-home (care in the child's own home)	
viii. Priority access for other grants or programs	
☐ Licensed center-based	
License exempt center-based	

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Licensed family child care home
License- exempt family child care home
In-home (care in the child's own home)
ix. Tax credits for providers
☐ Licensed center-based
License exempt center-based
Licensed family child care home
License- exempt family child care home
In-home (care in the child's own home)
x. Tax credits for parents
Licensed center-based
License exempt center-based
Licensed family child care home
License- exempt family child care home
☐ In-home (care in the child's own home)
xi. Payment of fees (e.g. licensing, accreditation)
Licensed center-based
License exempt center-based
Licensed family child care home
License- exempt family child care home
□ In-home (care in the child's own home)
b. Other:

7.3.6 Describe the measurable indicators of progress relevant to subsection 7.3 that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures.

N/A

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7.4 Improving the Supply and Quality of Child Care Programs and Services for Infants and Toddlers

Lead Agencies are required to spend 3 percent of their total CCDF expenditures on activities to improve the supply and quality of their infant and toddler care. This is in addition to the general quality set-aside requirement.

Lead Agencies are encouraged to use the required needs assessment to systematically review and improve the overall quality of care that infants and toddlers receive, the systems in place or needed to support and enhance the quality of infant and toddler providers, the capacity of the infant and toddler workforce to meet the unique needs of very young children, and the methods in place to increase the proportion of infants and toddlers in higher quality care, including any partnerships or coordination with Early Head Start and IDEA Part C programs.

7.4.1 Identify and describe the activities that are being implemented by the state/territory
to improve the supply (see also section 4) and quality of child care programs and
services for infants and toddlers and check which of the activities are available to each
provider type.

a. Establishing or expanding high-quality community- or neighborhood-based
family and child development centers. These centers can serve as resources to
child care providers to improve the quality of early childhood services for infants
and toddlers from low- income families and to improve eligible child care providers
capacity to offer high-quality, age-appropriate care to infants and toddlers from
low-income families.

Describe:

Licensed center-based
License exempt center-based
Licensed family child care home
License- exempt family child care home
In-home care (care in the child's own home)

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b. Establishing or expanding the operation of community-based, neighborhood-based, or provider networks comprised of home-based providers, or small centers focused on expanding the supply of infant and toddler care.
Describe:
☐ Licensed center-based ☐ License exempt center-based
Licensed family child care home
License- exempt family child care home
In-home care (care in the child's own home)
c. Providing training and professional development to enhance child care providers' ability to provide developmentally appropriate services for infants and toddlers.
Describe:
The Infant Toddler Specialist Network (ITSN) utilizes training in the Relationship Base
Care and ITERS-3.
 ✓ Licensed center-based ☐ License exempt center-based ☐ Licensed family child care home ☐ License- exempt family child care home ☐ In-home care (care in the child's own home) ✓ d. Providing coaching, mentoring, and/or technical assistance on this age group's unique needs from statewide or territory-wide networks of qualified infant/toddler specialists. Describe: The ITSN Specialists have been trained in the PITC/Relationship Based Care (RBC) trainings. The ITSN Specialists train all enrolled child care providers in the PITC/RBC trainings, provide onsite consultations and targeted trainings.
☑ Licensed center-based
License exempt center-based
Licensed family child care home
License- exempt family child care home
License- exempt family child care home

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In-home care (care in the child's own home)
7.4 Improving the Supply and Quality of Child Care Programs and Services for Infants and Toddlers
Lead Agencies are required to spend 3 percent of their total CCDF expenditures on activities to improve the supply and quality of their infant and toddler care. This is in addition to the general quality set-aside requirement.
Lead Agencies are encouraged to use the required needs assessment to systematically review and improve the overall quality of care that infants and toddlers receive, the systems in place or needed to support and enhance the quality of infant and toddler providers, the capacity of the infant and toddler workforce to meet the unique needs of very young children, and the methods in place to increase the proportion of infants and toddlers in higher quality care, including any partnerships or coordination with Early Head Start and IDEA Part C programs.
7.4.1 Identify and describe the activities that are being implemented by the state/territory to improve the supply (see also section 4) and quality of child care programs and services for infants and toddlers and check which of the activities are available to each provider type.
 e. Coordinating with early intervention specialists who provide services for infants and toddlers with disabilities under Part C of the Individuals with Disabilities Education Act (20 U.S.C. 1431 et seq.).
Describe:
☐ Licensed center-based ☐ License exempt center-based
Licensed family child care home
License- exempt family child care home
In-home care (care in the child's own home)
f. Developing infant and toddler components within the state/territory's
QRIS, including classroom inventories and assessments.
Describe:

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Licensed center-based			
License exempt center-based			
Licensed family child care home			
License- exempt family child care home			
In-home care (care in the child's own home)			
g. Developing infant and toddler components within the state/territory's child care licensing regulations.			
Describe:			
Licensed center-based			
License exempt center-based			
Licensed family child care home			
License- exempt family child care home			
In-home care (care in the child's own home)			
h. Developing infant and toddler components within the early learning and developmental guidelines.			
Describe:			
Licensed center-based			
License exempt center-based			
Licensed family child care home			
License- exempt family child care home			
In-home care (care in the child's own home)			

7.4 Improving the Supply and Quality of Child Care Programs and Services for Infants and Toddlers

Lead Agencies are required to spend 3 percent of their total CCDF expenditures on activities to improve the supply and quality of their infant and toddler care. This is in addition to the general quality set-aside requirement.

Lead Agencies are encouraged to use the required needs assessment to systematically review and improve the overall quality of care that infants and toddlers receive, the systems in place or needed to support and enhance the quality of infant and toddler providers, the capacity of the

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infant and toddler workforce to meet the unique needs of very young children, and the methods in place to increase the proportion of infants and toddlers in higher quality care, including any partnerships or coordination with Early Head Start and IDEA Part C programs.

to impr service	entify and describe the activities that are being implemented by the state/territory rove the supply (see also section 4) and quality of child care programs and es for infants and toddlers and check which of the activities are available to each er type.
	i. Improving the ability of parents to access transparent and easy-to-understand consumer information about high-quality infant and toddler care that includes information on infant and toddler language, social-emotional, and both early literacy and numeracy cognitive development.
	Describe:
	☐ Licensed center-based
	License exempt center-based
	Licensed family child care home
	License- exempt family child care home
	In-home care (care in the child's own home)
	j. Carrying out other activities determined by the state/territory to improve the quality of infant and toddler care provided within the state/territory and for which there is evidence that the activities will lead to improved infant and toddler health and safety, cognitive and physical development, and/or well-being.
	Describe:
	Licensed center-based
	License exempt center-based
	Licensed family child care home
	License- exempt family child care home
	In-home care (care in the child's own home)
	k. Coordinating with child care health consultants.

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Describe:

Licensed center-based	
☐ License exempt center-based	
Licensed family child care home	
License- exempt family child care home	
In-home care (care in the child's own home)	
☑ I. Coordinating with mental health consultants.	
Describe:	
The Lead Agency is in the process of purchasing a license to use the Michigan Alliance for Infant Mental Health (MI-AIMH) credential: Endorsement for Culturally Sensitive, Relationship-Focused Practice Promoting Infant & Early Childhood Mental Health® (Endorsement®) to train qualified individuals as consultants to administe infant and early childhood mental health consultation (IECMHC) services to professionals in child care. The goal is to create a network of consultants in prevention-based IECMHC programs to offer providers tools for positive behavior supports and link both families and providers to community resources as needed. Adopting the Endorsement® credential in Missouri, consultants will align with a highest program used worldwide to provide this much needed service in the early childhood field.	ntal er . By
 ✓ Licensed center-based ✓ License exempt center-based ✓ Licensed family child care home ✓ License- exempt family child care home ✓ In-home care (care in the child's own home) ✓ m. Establishing systems to collect real time data on available (vacant) slots in ECE settings, by age of child, quality level, and location of program. Describe: 	
☐ Licensed center-based ☐ License exempt center-based ☐ Licensed family child care home ☐ License- exempt family child care home ☐ In-home care (care in the child's own home)	

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n. Other.
Describe:
Licensed center-based
License exempt center-based
Licensed family child care home
License- exempt family child care home
In-home care (care in the child's own home)

7.4.2 Describe the measurable indicators of progress relevant to subsection 7.4 that the state/territory will use to evaluate its progress in improving the quality of child care programs and services for infants and toddlers within the state/territory and the data on the extent to which the state or territory has met these measures.

IECMH Consultants and ITSN Specialists conduct ITERS-3 and ECERS evaluations in order to measure progress of child care providers after participation in their services. Child care providers are also granted the opportunity to evaluate the IECHM Consultants and ITSN Specialists who are providing services. The Lead Agency is developing a process to collect and track the evaluation information and success rates of services in order to determine the success rate of such services.

7.5 Child Care Resource and Referral

A Lead Agency may expend funds to establish, expand, or maintain a statewide system of child care resource and referral services (98.53(a)(5)). It can be coordinated, to the extent determined appropriate by the Lead Agency, by a statewide public or private non-profit, community-based, or regionally based lead child care resource and referral organization (658E(c)(3)(B)(iii)). This effort may include activities done by local or regional child care and resource referral agencies, as discussed in section 1.7.

7.5.1 What are the services provided by the local or regional child care and resource and referral agencies?

The Lead Agency contracts with CCAMO for CCR&R services. CCAMO operates a

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website that connects families, child care providers, and communities to local, state, and federal supports. Families can find child care through a user-friendly online search tool with various criteria for child care needs and preferences. A team of dedicated Community Impact/Resource Specialists from CCAMO handle phone intakes, emails, and live chat requests for customers seeking child care referrals and/or child care related information, preparation, and dissemination of consumer education/referral packet materials, follow-up with referral customers, and follow-up with other customers who had general resource questions. Child care providers are able to easily update facility information, available openings, etc. through this website to give families a comprehensive summary of their programs and they can add additional features, such as pictures of their learning spaces and special messages about their program. Community Impact/Resource Specialists provide technical assistance and mentoring to child care professionals to help solve problems and elevate their voices at decision-making tables. CCAMO operates a Family Child Care Network to offer additional support and assistance to licensed family child care providers. CCAMO is a component of Missouri's professional development system and provides clock hour to credit hour education opportunities. Child care providers and staff have access to the Missouri Workshop Calendar to find approved clock hour trainings, resources for operating and improving their programs, and scholarship opportunities to earn a CDA credential, college credits, or college degrees through T.E.A.C.H. MISSOURI. CCAMO contracts with trainers around the state to deliver face-to-face and online trainings using best practice standards to identify trainers who understand, and apply, adult learning strategies. CCAMO also provides business and leadership training to the child care workforce. Communities can use the CCAMO website to receive data about child care and find support resources for families or businesses in need. Offline, CCAMO reaches out to the regional DSS resource centers on a quarterly basis to distribute materials about child care resources for families and providers. Throughout the year, CCAMO holds regional collaboration meetings with various service providers to allow networking opportunities for early childhood professionals, to host advisory committees for the T.E.A.C.H. and CDA scholarships, and to conduct an annual Professional Development Needs survey of the child care workforce. CCAMO also attends expos to distribute CCAMO branded services, holds community events to engage providers and families in conversations to build the child care landscape, and coordinates meetings to provide information on starting child care start-up.

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7.5.2 Describe the measurable indicators of progress relevant to subsection 7.5 that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures.

Data collected by CCAMO, and submitted to the Lead Agency through periodic reporting, are used to measure progress, including subsidy eligibility, foster care status, age range, schedule of care, program type, and feedback on satisfaction of referral process.

CCAMO also collects data from child care providers to provide information on availability of care by program type, licensure status, accreditation status, and technical assistance given to child care providers.

7.6 Facilitating Compliance With State Standards

7.6.1 What activities does your state/territory fund with CCDF quality funds to facilitate child care providers' compliance with state/territory health and safety requirements? These requirements may be related to inspections, monitoring, training, compliance with health and safety standards, and with state/territory licensing standards as outlined in Section 5.

Describe:

7.6.1 What activities does your state/territory fund with CCDF quality funds to facilitate child care providers' compliance with state/territory health and safety requirements? These requirements may be related to inspections, monitoring, training, compliance with health and safety standards, and with state/territory licensing standards as outlined in Section 5.

Describe:

The Lead Agency contracts with nine entities to provide Educare services statewide. The Educare program seeks to improve the quality of child care and early learning programs. Educare services are to strengthen the ability of child care providers and offer developmentally appropriate early care and education activities and programs. Services focus on providing health and safety training, providing technical assistance during the onsite monitoring process, and offering support groups for child care providers that focus on

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multiple topics such as discipline, curriculum, and operating as a business. Educare technical assistance includes working with educating providers on special needs of children from low-income families; encouraging parental involvement and participation with their child's developmental process; drawing on community leadership for design, implementation, and continued involvement to improve early child care and education systems. Educare providers create programs that are designed to meet the unique needs of their communities. Educare contractors work with registered providers, license-exempt providers, licensed family home, and licensed centers serving subsidy children. The Educare programs provide onsite visits to the organizations with which they work. In addition, the Lead Agency allocates CCDF dollars for the onsite monitoring of child care providers applying to become registered with the Lead Agency or in the process of renewing their registration for the purpose of receiving subsidy payments. Monitoring personnel conduct unannounced onsite monitoring of the space where child care services are provided prior to initial application approval, and annually thereafter, to ensure the applicant is in compliance with federal and state health and safety requirements. These monitoring personnel are also responsible for investigating complaints of alleged health and safety violations by registered child care providers. The Lead Agency currently provides these monitoring services through a competitive bid contract with the Public Consultant Group (PCG).

7.6.2 Does the state/territory provide financial assistance to support child care providers in complying with minimum health and safety requirements?

Y	No
	Yes. If yes, which types of providers can access this financial assistance?
	Licensed CCDF providers
	Licensed non-CCDF providers
	License-exempt CCDF providers
	☐ Other
	Describe:

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7.6.3 Describe the measurable indicators of progress relevant to subsection 7.6 that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures.

The Educare program contractors collect a variety of data related to quality improvements. The improvement is measured through the Educare contractors using a Quality Assessment Tool that is completed at time child care providers enroll and is updated quarterly. The Lead Agency is developing a process for regular evaluation of key measures of progress from the Educare program (e.g. tracking the number of child care providers enrolled for services, the number of services received by the provider, and the percentage of improvement that child care providers achieve through the course of the technical assistance provided).

7.7 Evaluating and Assessing the Quality and Effectiveness of Child Care Programs and Services

7.7.1 Does the state/territory measure the quality and effectiveness of child care programs and services in both child care centers and family child care homes?

☑ No

Yes.

If yes, describe any tools used to measure child, family, teacher, classroom, or provider improvements, and how the state/territory evaluates how those tools positively impact children.

7.7.2 Describe the measurable indicators of progress relevant to subsection 7.7 that the state/territory will use to evaluate its progress in improving the quality of child care programs and services in child care centers and family child care homes within the

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state/territory and the data on the extent to which the state or territory has met these measures.

N/A

7.8 Accreditation Support

7.8.1 Does the state/territory support child care providers in the voluntary pursuit of accreditation by a national accrediting body with demonstrated, valid, and reliable program standards of high quality?

a. Yes, the state/territory has supports operating statewide or territory-wide for both child care centers and family child care homes. Is accreditation available for programs serving infants, toddlers, preschoolers and school-age children? Describe the support efforts for all types of accreditation that the state/territory provides to child care centers and family child care homes to achieve accreditation In addition to the existing national accrediting bodies, the Lead Agency recognizes the Missouri Accreditation of Programs for Children and Youth, also known as Missouri Accreditation (MOA), as a support for providers who voluntarily pursue accreditation. MOA provides ongoing monitoring, evaluation, and recognition of programs that have achieved accreditation. MOA provides accreditation facilitation, also known as coaching, for childcare programs during the accrediting process and when they achieve accreditation. MOA accredits high quality programs which serve all age's groups: infant-toddler, early childhood, school-age programs in a variety of child care settings, including center-based, home-based, school-age care and family home programs. To receive accreditation, a program must exceed the minimum licensing requirements because MOA functions in areas beyond the scope of state licensing for early childhood and school-age programming. Accredited facilities receive an accreditation rate incentive. In addition, the Lead Agency is implementing an accreditation support for subsidy child care providers pursuing accreditation. An incentive payment will be provided once providers have completed a self-study and submitted the completed self-study for review. The incentive is intended to support the

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extending this opportunity to more child care providers using COVID-19 relief funding.
b. Yes, the state/territory has supports operating statewide or territory-wide for child care centers only. Describe the support efforts for all types of accreditation that the state/territory provides to child care centers. Describe:
c. Yes, the state/territory has supports operating statewide or territory-wide for family child care homes only. Describe the support efforts for all types of accreditation that the state/territory provides to family child care Describe:
 d. Yes, the state/territory has supports operating as a pilot-test or in a few localities but not statewide or territory-wide i. Focused on child care centers Describe:
ii. Focused on family child care homes Describe:
 e. No, but the state/territory is in the in the development phase of supporting accreditation. i. Focused on child care centers Describe:
☐ ii. Focused on family child care homes Describe:
f. No, the state/territory has no plans for supporting accreditation.

provider in continuing the accreditation process. The Lead Agency will consider

7.8.2 Describe the measurable indicators of progress relevant to subsection 7.8 that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures.

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As of March 31, 2021, there were 213 child care subsidy providers who are accredited. When compared to the number in March 2019, of 243 child care subsidy providers who were accredited, Missouri has again experienced a decrease, indicating a loss in access to quality child care in the state's Child Care Subsidy program. While this reduction may be attributed to the COVID-19 pandemic, it may also be indicative of the limited resources available to support providers while they pursue accreditation. The Lead Agency is developing a system to track the number of incentives (e.g., rate enhancement) provided to child care providers and compare to the number of providers achieving accreditation. The long-term goal of the Lead Agency is to increase the annual number of accredited child care providers in the state of Missouri, which will require additional consideration and discussions about the types of incentives needed to increase the number of accredited child care providers.

7.9 Program Standards

7.9.1 Describe how the state/territory supports state/territory or local efforts to develop or adopt high-quality program standards, including standards for:

a. Infants and toddlers

Infant Toddler Specialist Network (ITSN) programs utilize the Program for Infant and Toddler Care as a foundation to provide services to providers. The strategies improve the quality of care and education that infants and toddlers receive while away from the primary caregiver, as well as, increase the knowledge level and competencies of infant and toddler caregivers.

b. Preschoolers

The Lead Agency provides multiple Educare programs that provide technical assistance to providers, professional development opportunities for school readiness, and support in the development of a Quality Improvement Plan that focuses on health and safety requirements, as well as, other program improvements that meet Missouri's Core Competencies and Early Learning Guidelines.

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c. and/or School-age children.

As part of the consolidation of childhood programs into a single Office of Childhood, the state's afterschool programs are housed in the same office as Child Care Subsidy and Licensing, federal and state-funded preschool, and home visiting. The Lead Agency collaborates with MASN and is a member of the Missouri After School Steering Committee which meets quarterly to discuss and set the direction for their statewide efforts. MASN has five sub-committees: Funding & Sustainability, Public Awareness, Public Policy, Quality and STEM. The Lead Agency representative serves on the Quality Committee.

7.9.2 Describe the measurable indicators of progress relevant to subsection 7.9 that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures.

In accordance with Missouri statute (§ 161.217, RSMo) at:

https://revisor.mo.gov/main/OneSection.aspx?section=161.217&bid=35248&hl=, the Lead Agency is piloting a Quality Assurance Report with the goal of providing a continuous quality improvement process for early learning programs and to provide families with consumer education about the quality of early learning programs. Information about the pilot is available at: https://dese.mo.gov/quality-schools/early-learning/quality-assurance-report.

7.10 Other Quality Improvement Activities

7.10.1 List and describe any other activities that the state/territory provides to improve the quality of child care services for infants and toddlers, preschool-aged, and school-aged children, which may include consumer and provider education activities; and also describe the measurable indicators of progress for each activity relevant to this use of funds that the state/territory will use to evaluate its progress in improving provider preparedness, child safety, child well-being, or kindergarten entry, and the data on the extent to which the state or territory has met these measures. Describe:

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The Lead Agency funds the ParentLink WarmLine/GrandFamily Program that provides quality parenting information, materials, and other resources such as research-related literature, educational brochures, and lending library items, as well as services such as outreach activities and support groups. The goal of these services is to proactively strengthen and support Missouri's families and communities. The WarmLine is an 800 number for the general public to contact for information. The ParentLink WarmLine/GrandFamily Program is open Monday-Friday 8:00 AM-10:00 PM and 12:00 PM -5:00 PM Saturday and Sunday and it maintains an answering system for customers to leave a message, if staff is on another call or if calls are received outside of business hours. WarmLine staff return all messages and e-mails within one business day. Indicators to measure the program include the number of contacts made to the WarmLine (mail, email, inperson, text, Facebook/Skype), which was 185,972 in Fiscal Year 2019, an increase from 153,699 in Fiscal Year 2018. A second indicator to measure the program is the total the number of children impacted by the use of the WarmLine (through contacts with Parents/Caregivers), which was 3,177 in Fiscal Year 2019, a decrease from 3,528 in Fiscal Year 2018. A third indicator to measure the program is the number of outreach materials provided to consumers of the WarmLine (Hosted events, Presentations, Promotional – not mailing, Email Listserve Outreach, Resource Table only), which was 52,609 in Fiscal Year 2019, a decrease from 210,701 in Fiscal Year 2018.

8 Ensure Grantee Program Integrity and Accountability

Program integrity and accountability activities are integral to the effective administration of the CCDF program. Lead Agencies are required to describe in their Plan effective internal controls that ensure integrity and accountability while maintaining the continuity of services (98.16(cc)). These accountability measures should address reducing fraud, waste, and abuse, including program violations and administrative errors.

This section includes topics on internal controls to ensure integrity and accountability and processes in place to investigate and recover fraudulent payments and to impose sanctions on clients or providers in response to fraud. Respondents should consider how fiscal controls, program integrity and accountability apply to:

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- -- Memorandums of understanding within the Lead Agency's various divisions that administer or carry out the various aspects of CCDF
- -- MOU's, grants, or contracts to other state agencies that administer or carry out various aspects of CCDF
- -- Grants or contracts to other organizations that administer or carry out various aspects of CCDF such as professional development and family engagement activities
- -- Internal processes for conducting child care provider subsidy
- 8.1 Internal Controls and Accountability Measures To Help Ensure Program Integrity
- 8.1.1 Lead Agencies must ensure the integrity of the use of funds through sound fiscal management and must ensure that financial practices are in place (98.68 (a)(1)). Describe the processes in place for the Lead Agency to ensure sound fiscal management practices for all expenditures of CCDF funds. Check all that apply:
 - a. Verifying and processing billing records to ensure timely payments to providers

Describe:

The Lead Agency makes payments to providers through a web-based system called FAMIS. The payment system is tied to the web-based CCBIS attendance system to verify the accuracy of invoices. The attendance system has internal controls such as photo capabilities, a GPS locator, time clocks, etc. to help prevent fraud and abuse. Payments are made on a timely basis by allowing child care providers to invoice directly the first day of the month following a service month. Staff in the Lead Agency's Child Care Payment Unit conducts post-payment reviews to verify accuracy of payments by reviewing the daily Error Reports generated from FAMIS.

☑ b. Fiscal oversight of grants and contracts

Describe:

Invoices for contracts are due within 30 days of the following service month. Staff in the Lead Agency monitor the invoices for contract compliance, with review by at least

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one staff member. Upon review, staff in the Lead Agency forward the results to the Finance Unit for final review and payment. Grantees and contractors are required to submit monthly or quarterly programmatic and financial reports to ensure fiscal oversight. In addition, the Lead Agency completes a yearly review to ensure contract/grant requirements are met.

c. Tracking systems to ensure reasonable and allowable costs

Describe:

The Lead Agency reviews and submits invoices for processing. The contract manager staff review expenditures submitted by the contractor to ensure invoiced expenses meet contract requirements and are allowable expenses. The Lead Agency has a specialized unit to process and track expenditures to monitor expenditures through the contract year. This process allows invoicing to be specialized and consistent across all provider contracts.

d. Other Describe:

8.1.2 Check and describe the processes that the Lead Agency will use to identify risk in their CCDF program. Check all that apply:

■ a. Conduct a risk assessment of policies and procedures Describe:

The Lead Agency uses resources created by the National Center of Subsidy Innovation and Accountability (NCSIA). The Lead Agency implements resources that are deemed appropriate regarding risk assessments and it participates regularly in NCSIA meetings.

■ b. Establish checks and balances to ensure program integrity
 Describe:

The Lead Agency uses resources created by the National Center of Subsidy Innovation and Accountability (NCSIA). The Lead Agency implements resources that

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are deemed appropriate regarding checks and balances. In addition, the lead agency participates in the Improper Payment Review and undergoes periodic audits from the state auditor's office.

c. Use supervisory reviews to ensure accuracy in eligibility determination Describe:

DSS FSD Eligibility Supervisors review case determinations for any new staff before final approval to ensure accuracy in eligibility determination. In addition, DSS FSD Eligibility Supervisors conduct targeted case reviews on a monthly basis. The DSS FSD policies for targeted reviews include issues that have been identified through audit reports, monitoring activities, and new policy areas. These targeted reviews change quarterly based on trends and feedback from families and staff. The target reviews help identify if training needs to developed or focus on specific policies to help educate the staff.

	d. C	the	r
Г	es(crib	е:

- 8.1.3 States and territories are required to describe effective internal controls that are in place to ensure program integrity and accountability (98.68(a)), including processes to train child care providers and staff of the Lead Agency and other agencies engaged in the administration of CCDF about program requirements and integrity.
 - a. Check and describe how the state/territory ensures that all providers for children receiving CCDF funds are informed and trained regarding CCDF requirements and integrity (98.68(a)(3)). Check all that apply.
 - ☑ i. Issue policy change notices.

Describe:

The Lead Agency issues memoranda upon policy changes. The Lead Agency communicates policy change notices via email and posts these on the Lead Agency's website at: https://dssmanuals.mo.gov/cdmemos/.

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■ ii. Issue policy manual.

Describe:

The Lead Agency posts the Child Care Provider Policy Manual on the Lead Agency's website at: https://dss.mo.gov/cd/child-care/files/provider-policy-manual.pdf.

iii. Provide orientations.

Describe:

Prior to participation in the program, providers are required to view the Subsidy Online Training which provides orientation to the program. The Lead Agency is in the process of reviewing and updating the orientation.

v. Provide training.

Describe:

The Lead Agency makes online training available for providers in child care subsidy. Providers are required to complete the Subsidy Online Training prior to participation in the program. Other training and professional development opportunities are available through the Missouri Workshop Calendar.

v. Monitor and assess policy implementation on an ongoing basis. Describe:

Program staff in the Lead Agency completes an annual onsite monitoring of license-exempt subsidy providers. With the implementation of electronic time and attendance, the Lead Agency is able to conduct desk reviews on randomly selected child care providers to ensure accurate reporting is being transmitted. As part of the transition to the Office of Childhood, the Lead Agency will be reviewing processes and will make adjustments as necessary to maintain a high level of program integrity.

vi. Meet regularly regarding the implementation of policies.

Describe:

The Lead Agency conducts monthly meetings with internal staff to ensure implementation of policies.

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Vii.	Other.
Des	scribe:

b. Check and describe how the Lead Agency ensures that all its staff members and any staff members in other agencies who administer the CCDF program through MOUs, grants and contracts are informed and trained regarding program requirements and integrity (98.68 (a)(3)). Check all that apply:

i. Issue policy change notices.

Describe:

The Lead Agency consults with the DSS FSD and internal staff as any applicable policy is developed and reviewed, in order to obtain input prior to final decisions being made. Policy change notices effecting DSS FSD and Lead Agency staff are distributed through email and posted on the Lead Agency website. In addition, policy change notices are communicated during DSS FSD and Lead Agency monthly staff meetings, and as needed. In order to promote ongoing coordination of child care subsidy activities, the Lead Agency meets quarterly with staff from DSS FSD to review policies and discuss practices.

ii. Train on policy change notices.

Describe:

The Lead Agency participates in the same training that is delivered to Eligibility Specialists within the DSS FSD, which occurs anytime there is a new policy or change in policy impacting child care subsidy. In addition, internal staff are trained on policy change notices during DSS FSD and Lead Agency monthly staff meetings.

iii. Issue policy manuals.

Describe:

The Lead Agency consults with the DSS FSD and internal staff as any applicable policy is developed and reviewed, in order to obtain input prior to final decisions being made. The Lead Agency distributes the link to the policy manual at: https://dss.mo.gov/cd/child-care/files/provider-policy-manual.pdf to DSS FSD and internal staff.

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v. Train on policy manual.

Describe:

The Lead Agency participates in the same training that is delivered to Eligibility Specialists within the DSS FSD, which occurs anytime there is a new policy or change in policy. In addition, internal Lead Agency staff are required to take the Child Care Basic Training module which covers the policy manual.

v. Monitor and assess policy implementation on an ongoing basis.

Describe:

The Lead Agency meets with leadership of the DSS FSD, Child Care Processing Center on a quarterly basis. Results of targeted case reviews, completed by FSD Supervisors, are reviewed to determine if there is a need for policy clarification, rewrites, or additional training.

vi. Meet regularly regarding the implementation of policies.

Describe:

The Lead Agency attends regular meetings with the frontline DSS FSD staff to answer questions and provide policy interpretation. These meetings build relationships with staff that allow up/down communication and understanding why a policy is implemented.

vii. Other.

Describe:

8.1.4 Describe the processes in place to regularly evaluate Lead Agency internal control activities (98.68 (a)(4)). Describe:

The Lead Agency reviews state and federal audit results to assist in evaluating internal control activities. Other processes include reviewing the Monthly Managed Report for data inconsistencies or data trends, evaluating error rates on child authorizations, and seeking input from the State's budget and planning office on spend plans.

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8.1.5 Lead Agencies conduct a wide variety of activities to fight fraud and ensure program integrity. Lead Agencies are required to have processes in place to identify fraud and other program violations to ensure program integrity. Program violations can include both intentional and unintentional client and/or provider violations, as defined by the Lead Agency. These violations and errors, identified through the error-rate review process, may result in payment or nonpayment (administrative) errors and may or may not be the result of fraud, based on the Lead Agency definition. Check and describe any activities that the Lead Agency conducts to ensure program integrity.

- a. Check and describe all activities that the Lead Agency conducts, including the results of these activities, to **identify and prevent fraud or intentional program violations.** Include in the description how each activity assists in the identification and prevention of fraud and intentional program violations.
 - ☑ i. Share/match data from other programs (e.g., TANF program, Child and Adult Care Food Program, Food and Nutrition Service (FNS), Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, Public Assistance Reporting Information System (PARIS)).

Describe the activities and the results of these activities:

The Child Care Subsidy program uses the same automated eligibility system as other FSD programs; TANF and SNAP. Reported changes are captured in the system and used to make ongoing eligibility determinations.

☑ ii. Run system reports that flag errors (include types).

Describe the activities and the results of these activities:

Staff in the Lead Agency run monthly reports and review the reports to monitor absence and holiday errors, duplicate authorizations, holiday usage, other provider risk factors, and potential system errors as needed. Staff distribute report summaries to agency leadership for review and input on additional actions to take as needed.

☑ iii. Review enrollment documents and attendance or billing records
Describe the activities and the results of these activities:

The Lead Agency's Child Care Payment Unit selects providers each month to

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review and compare attendance records. Providers under review are selected based on various risk factors (i.e. large number of subsidy eligible children in care, no reported absences, etc.) that may indicate a higher risk of fraud or intentional program violations.

☑ iv. Conduct supervisory staff reviews or quality assurance reviews.

Describe the activities and the results of these activities:

The DSS, FSD supervisory staff, conducts routine data reviews and quality assurance reviews to ensure policies are applied correctly and as a second view of documentation to ensure program integrity.

v. Audit provider records.

Describe the activities and the results of these activities:

The Lead Agency's Child Care Payment Unit selects providers each month to review and compare attendance records. Providers under review are selected based on various risk factors (i.e., large number of subsidy eligible children in care, no reported absences, etc.) that may indicate a higher risk of fraud or intentional program violations.

vi. Train staff on policy and/or audits.

Describe the activities and the results of these activities:

Staff in the Lead Agency are trained on policies upon hire and are provided refresher training on a regular basis, as determined by the Lead Agency but at a minimum on an annual basis. Lead Agency staff are trained to identify errors that may be intentional and send a referral for follow up when there are concerns of fraud or intentional program violations.

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Describe the activities and the results of these activities:

8.1.5 Lead Agencies conduct a wide variety of activities to fight fraud and ensure program integrity. Lead Agencies are required to have processes in place to identify fraud and other program violations to ensure program integrity. Program violations can include both intentional and unintentional client and/or provider violations, as defined by

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the Lead Agency. These violations and errors, identified through the error-rate review process, may result in payment or nonpayment (administrative) errors and may or may not be the result of fraud, based on the Lead Agency definition. Check and describe any activities that the Lead Agency conducts to ensure program integrity.

- b) Check and describe all activities the Lead Agency conducts to identify unintentional program violations. Include in the description how each activity assists in the identification and prevention of unintentional program violations. Include a description of the results of such activity.
 - ☑ i. Share/match data from other programs (e.g., TANF program, CACFP, FNS, Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration (PARIS)).

Describe the activities and the results of these activities:

The Lead Agency's Child Care Subsidy program uses the same automated eligibility system as other FSD programs, TANF, and SNAP. Reported changes are captured in the system and used to make ongoing eligibility determinations.

ii. Run system reports that flag errors (include types).

Describe the activities and the results of these activities:

The Lead Agency flags absence and holiday errors, duplicate authorizations, reports on holiday usage, and reports based on provider risk factors. All of the reports help identify unintentional program violations.

☑ iii. Review enrollment documents and attendance or billing records

Describe the activities and the results of these activities:

The Lead Agency's Child Care Payment Unit selects providers each month to review and compare attendance records. Providers under review are selected based on various risk factors (i.e. large number of subsidy eligible children in care, no reported absences, etc.) that may indicate a higher risk of fraud or program violations.

iv. Conduct supervisory staff reviews or quality assurance reviews.

Describe the activities and the results of these activities:

Supervisory staff in the Lead Agency conduct quality assurance reviews to ensure policy is applied correctly and as a second view of documentation to ensure program integrity, as well as to identify any staff training needs that may need to be addressed to prevent program violations.

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v. Audit provider records.

Describe the activities and the results of these activities:

The Lead Agency's Child Care Payment Unit selects providers each month to review and compare attendance records. Providers under review are selected based on various risk factors (i.e. large number of subsidy eligible children in care, no reported absences, etc.) that may indicate a higher risk of fraud or program violations.

vi. Train staff on policy and/or audits.

Describe the activities and the results of these activities:

Staff in the Lead Agency are trained to identify errors that may be intentional or unintentional. This may result in the identification of additional follow up training needs.

vii. Other

Describe the activities and the results of these activities:

- 8.1.5 Lead Agencies conduct a wide variety of activities to fight fraud and ensure program integrity. Lead Agencies are required to have processes in place to identify fraud and other program violations to ensure program integrity. Program violations can include both intentional and unintentional client and/or provider violations, as defined by the Lead Agency. These violations and errors, identified through the error-rate review process, may result in payment or nonpayment (administrative) errors and may or may not be the result of fraud, based on the Lead Agency definition. Check and describe any activities that the Lead Agency conducts to ensure program integrity.
- c) Check and describe all activities the Lead Agency conducts to identify and prevent agency errors. Include in the description how each activity assists in the identification and prevention of agency errors.
 - ☑ i. Share/match data from other programs (e.g., TANF program, CACFP, FNS, Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration (PARIS)).

Describe the activities and the results of these activities:

The Child Care Subsidy program uses the same automated eligibility system as other FSD programs, TANF, and SNAP. Reported changes are captured in the

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system and used to make ongoing eligibility determinations.

ii. Run system reports that flag errors (include types).

Describe the activities and the results of these activities:

Lead Agency staff flag absence and holiday errors, duplicate authorizations, and other reports that may be as a result of a system error or agency error. The reports are a method of identifying system issues or misapplication of policy.

☑ iii. Review enrollment documents and attendance or billing records

Describe the activities and the results of these activities:

"Enrollment" documents, such as child care need verification, income verification, and parent schedules, are reviewed during supervisory staff reviews to ensure the documents are documented accurately and policy is applied appropriately.

iv. Conduct supervisory staff reviews or quality assurance reviews.

Describe the activities and the results of these activities:

Supervisory staff in the Lead Agency conducts quality assurance reviews to ensure policy is applied correctly, as well as to identify any staff training needs that may need to be addressed.

v. Audit provider records.

Describe the activities and the results of these activities:

vi. Train staff on policy and/or audits.

Describe the activities and the results of these activities:

Staff in the Lead Agency are trained on policies upon hire and are provided refresher training on a regular basis, as determined by the Lead Agency but at a minimum on an annual basis, to ensure policy is applied correctly and to ensure there is an understanding of policy and procedure.

vii. Other

Describe the activities and the results of these activities:

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8.1.6 The Lead Agency is required to identify and recover misspent funds as a result of fraud, and it has the option to recover any misspent funds as a result of errors.

a. Identify what agency is responsible for pursuing fraud and overpayments (e.g. State Office of the Inspector General, State Attorney).

During the transition and in the implementation of the new Office of Childhood, DESE and DSS will work together as responsible agencies for pursuing issues of fraud and overpayment. As the Lead Agency, DESE will be responsible for investigating all reports of improper payments in the Child Care Subsidy Program. If improper payments for child care subsidy are reported to DSS WIU, then the unit will forward the report to DESE to investigate.

- 8.1.6 The Lead Agency is required to identify and recover misspent funds as a result of fraud, and it has the option to recover any misspent funds as a result of errors.
- b. Check and describe all activities, including the results of such activity, that the Lead Agency uses to investigate and recover improper payments due to fraud. Include in the description how each activity assists in the investigation and recovery of improper payment due to fraud or intentional program violations. Activities can include, but are not limited to, the following:
 - i. Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount

Describe the activities and the results of these activities:

The Lead Agency requires recovery of an improper payment with a minimum dollar amount of \$5.00.

☑ ii. Coordinate with and refer to the other state/territory agencies (e.g., state/territory collection agency, law enforcement agency).

Describe the activities and the results of these activities:

The Lead Agency investigates any cases of improper payments for child care that appear to be as a possible result of fraud or intentional violation. In these cases, the Lead Agency will investigate the case and determine if fraud can be identified for prosecution or if there is an intentional violation that can be identified for recovery. Additionally, the Lead Agency is developing a MOU with DSS WIU to ensure all fraud

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and intentional violations, including that committed by an eligible family or provider for any other welfare program (e.g., TANF, SNAP, Medicaid), are investigated.

iii. Recover through repayment plans.

Describe the activities and the results of these activities:

Once overpayment has been identified, the Lead Agency can recover through a repayment plan any overpayments identified, whether by an intentional or unintentional violation, and regardless of the provider being a contracted or registered child care provider.

v. Reduce payments in subsequent months.

Describe the activities and the results of these activities:

Once overpayment has been identified, the Lead Agency can recover from future payments any overpayments identified, whether by an intentional or unintentional violation, and regardless of the provider being a contracted and/or registered child care provider.

v. Recover through state/territory tax intercepts.

Describe the activities and the results of these activities:

vi. Recover through other means.

Describe the activities and the results of these activities:

vii. Establish a unit to investigate and collect improper payments and describe the composition of the unit below.

Describe the activities and the results of these activities:

The Lead Agency investigates any cases of improper payments for child care that appear to be as a possible result of fraud. In these cases, the Lead Agency will investigate the case and determine if fraud can be identified for prosecution or if there is an intentional violation that can be identified for recovery.

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Describe the activities and the results of these activities:

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8.1.6 The Lead Agency is required to identify and recover misspent funds as a result of fraud, and it has the option to recover any misspent funds as a result of errors.

- c. Check and describe any activities that the Lead Agency will use to investigate and recover improper payments due to unintentional program violations. Include in the description how each activity assists in the investigation and recovery of improper payments due to unintentional program violations. Include a description of the results of such activity. Activities can include, but are not limited to, the following:
 - i. N/A. the Lead Agency does not recover misspent funds due to unintentional program violations.
 - ☑ ii. Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount

Describe the activities and the results of these activities:

The Lead Agency requires recovery of an improper payment with a minimum dollar amount of \$5.00.

☑ iii. Coordinate with and refer to the other state/territory agencies (e.g., state/territory collection agency, law enforcement agency).

Describe the activities and the results of these activities:

The Lead Agency investigates any cases of improper payments for child care that appear to be due to an unintentional violation. In these cases, the Lead Agency will investigate the case and determine if the unintentional violation can be identified for recovery. Additionally, the Lead Agency is developing a MOU with DSS WIU to ensure all unintentional violations, including that committed by an eligible family or provider for any other welfare program (e.g., TANF, SNAP, Medicaid), is investigated.

viv. Recover through repayment plans.

Describe the activities and the results of these activities:

Once overpayment has been identified, the Lead Agency can recover through a repayment plan any overpayments identified, whether by an unintentional or intentional violation, and regardless of the provider being a contracted or registered child care provider.

☑ v. Reduce payments in subsequent months.

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Describe the activities and the results of these activities: Once overpayment has been identified, the Lead Agency can recover from future payments any overpayments identified, whether by an unintentional or intentional violation, and regardless of the provider being a contracted and/or registered child care provider. vi. Recover through state/territory tax intercepts. Describe the activities and the results of these activities: vii. Recover through other means. Describe the activities and the results of these activities: viii. Establish a unit to investigate and collect improper payments and describe the composition of the unit below. Describe the activities and the results of these activities: The Lead Agency investigates any cases of improper payments for child care that appear to be as a possible result of unintentional violations. In these cases, the Lead Agency will investigate the case and determine if the violation can be identified for recovery. ix. Other Describe the activities and the results of these activities: 8.1.6 The Lead Agency is required to identify and recover misspent funds as a result of fraud, and it has the option to recover any misspent funds as a result of errors. d. Check and describe all activities that the Lead Agency will use to investigate and recover improper payments due to agency errors. Include in the description how each

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activity assists in the investigation and recovery of improper payments due to

i. N/A. the Lead Agency does not recover misspent funds due to agency

ii. Require recovery after a minimum dollar amount of an improper payment

administrative errors. Include a description of the results of such activity.

and identify the minimum dollar amount

Describe the activities and the results of these activities:

The Lead Agency requires recovery of an improper payment with a minimum dollar amount of \$5.00.

☑ iii. Coordinate with and refer to the other state/territory agencies (e.g., state/territory collection agency, law enforcement agency).

Describe the activities and the results of these activities:

The Lead Agency investigates any cases of improper payments for child care that appear to be the result of an agency error. In these cases, the Lead Agency will investigate the case and determine the amount identified for recovery. As a result of such error, the Lead Agency will review and update any internal policies, procedures, or system functionality as needed to ensure a future error does not occur. Additionally, the Lead Agency is developing a MOU with DSS WIU to ensure an agency error for any related welfare program (e.g., TANF, SNAP, Medicaid), are also investigated, and similar corrective actions are taken to ensure a future error does not occur (e.g., review and update internal policies, procedures, system functionality).

vi. Recover through repayment plans.

Describe the activities and the results of these activities:

Once overpayment is identified, the Lead Agency can recover through a repayment plan any overpayments identified, including an agency error, and regardless of the provider being a contracted or registered child care provider.

v. Reduce payments in subsequent months.

Describe the activities and the results of these activities:

Once overpayment is identified, the Lead Agency can recover from future payments any overpayments identified, including an agency error, and regardless of the provider being a contracted and/or registered child care provider.

vi. Recover through state/territory tax intercepts. Describe the activities and the results of these activities:
vii. Recover through other means.

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Describe the activities and the results of these activities:

viii. Establish a unit to investigate and collect improper payments and describe the composition of the unit below.

Describe the activities and the results of these activities:

The Lead Agency investigates any cases of improper payments for child care that appear to be the result of an agency error. In these cases, the Lead Agency will investigate the case and determine the amount identified for recovery. As a result of such error, the Lead Agency will review and update any internal policies, procedures or system functionality as needed to ensure a future error does not occur.

ix. Other								
Describe the	activities	and th	he res	sults	of th	nese	activ	ities:

8.1.7 What type of sanction will the Lead Agency place on clients and providers to help reduce improper payments due to program violations? Check and describe all that apply:

■ a. Disqualify the client. If checked, describe this process, including a description of the appeal process for clients who are disqualified.

Describe the activities and the results of these activities:

Recipents are disqualified when a claim is established against them for overpayment of childcare subsidy and they do not make payments on the claim. Recipients may request a hearing on the adverse action within 90 days of the action.

Describe the activities and the results of these activities:

The Lead Agency will not contract with child care providers who have been prosecuted in the criminal court for committing fraud in the Child Care Subsidy program.

c. Prosecute criminally.

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Describe the activities and the results of these activities:

The Lead Agency will make referrals to the local prosecuting attorney when it has established a case of fraud by a provider or child care recipient.

d. Other.

Describe the activities and the results of these activities:

Appendix A: MRS, Alternative Methodology and Narrow Cost Analysis Waiver Request Form

Lead Agencies may apply for a temporary waiver for the Market Rate Survey or ACF preapproved alternative methodology and/or the narrow cost analysis in. These waivers will be considered aextraordinary circumstance waiversa to provide relief from the timeline for completing the MRS or ACF pre-approved alternative methodology and the narrow cost analysis during the COVID-19 pandemic. These waivers are limited to a one-year period.

Approval of these waiver requests is subject to and contingent on OCC review and approval of responses in Section 4, questions 4.2.1 and 4.2.5.

To submit a Market Rate Survey (MRS) or ACF pre-approved alternative methodology or a Narrow Cost Analysis waiver, complete the form below.

Check and describe each provision for which the Lead Agency is requesting a time-limited waiver extension.

- Appendix A.1: The Market Rate Survey (MRS) or ACF pre-approved alternative methodology (See related question 4.2.1.)
 - 1. Describe the provision (MRS or ACF pre-approved alternative methodology) from which the state/territory seeks relief. Include the reason why the Lead Agency is seeking relief from this provision due to this extraordinary circumstance.

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Upon consultation with the Child Care Provider Advisory Council, both, the Child Care Provider Advisory Council and the Lead Agency do not believe that a market rate survey conducted during this state of emergency will reflect accurate costs associated with providing child care services in Missouri.

2. Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children.

Many child care providers are closed, operating on lower enrollment, or have additional costs. Once the economy improves, true child care costs may be collected.

3. Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.

The Department asserts that this request for waiver does not compromise the health, safety, or welfare of children or families.

- Appendix A.2: The Narrow Cost Analysis (See related question 4.2.5.)
 - 1. Describe the provision (Narrow Cost Analysis) from which the state/territory seeks relief. Include the reason why in these extraordinary circumstances, the Lead Agency is seeking relief from this provision.

Conducting a Narrow Cost Analysis requires current and accurate information that reflects the cost of care provided in the most populous part of the state, from those providers with the highest rates of care, as reported on a current Market Rate Survey (MRS), and compared to providers who have the lowest rates of care. As a result of providers having limited enrollment and/or capacity during the existing COVID-19 pandemic, conducting a Market Rate Survey cannot reflect the best information for an accurate analysis. The Lead Agency has transitioned to a newly created Office of Childhood during the development of this plan. It seeks relief from this provision in order to further understand, intentionally develop, and disseminate, a current MRS and, as a result, carefully conduct the required Narrow Cost Analysis.

2. Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children.

The Lead Agency is interested in providing budget recommendations that best reflect

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the cost of providing quality child care services in the state. A waiver for this provision allows the Lead Agency time to better coordinate efforts to develop an intentional MRS that encourages more accurate responses from providers and to develop a mechanism to encourage an increased rate of response. Using the most current and accurate information will assist the Lead Agency to pursue reasonable budget recommendations for consideration. As part of the newly created Office of Childhood, the Lead Agency has the benefit of developing recommendations in coordination with child care licensing, Head Start, IDEA Part C, Department of Mental Health as well as other important stakeholders throughout the state.

3. Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.

The Lead Agency continues to operate under the provisions of CCDF, and other state requirements, that provide health, safety, and well-being of children served through CCDF. A waiver of this provision will not compromise those services. Health and safety training and monitoring continues as prescribed in CCDF regulation as well as state statute.

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